

THE PROGRESSIVE DENTIST

PUBLISHED BY THE

Dentists Study Chapter

OF THE

INTERCOLLEGIATE SOCIALIST SOCIETY



MONTHLY PUBLICATION

Vol. I.

January 1912.

No. 1.

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THE DENTAL PARLOR.

Of the many agencies tending to degrade the dental profession from a socially useful enterprise to a mere money-making scheme none have contributed so much towards that end as the Dental Parlor.

Are you familiar with this "institution" of American dental life? If not, as an earnest student or graduate, you ought to make it your business to get familiar with its pernicious manifestations.

It flourishes principally in the poorer quarters of our larger cities. It is owned "boot and breeches" by unscrupulous business men who have never frequented nor even laid their eyes upon the equipment of an up-to-date dental college? They employ graduate dentists and exploit both these and the unfortunate who fall into their clutches.

What are the causes that have given rise to and make possible the flourishing of such a condition of affairs. They are the following:

1) *Commercialism.* Like a good many of our social activities, Dentistry has been commercialized. Business men who do not and cannot appreciate professional skill or knowledge have "taken up" dentistry purely as a business proposition, as a means of making profits, big profits. They are in the profession for what there is in it, to use a common expression.

2) *Inadequate Dental Laws.* The present dental laws are so inadequate and full of loopholes that they are taken advantage of and made to serve the ends of unscrupulous dentists and business men, thus degrading dentistry to the level of a lucrative business. As proof of the statement, notice the increase of the dental parlors and the multiplication of their nefarious practices.

3) *Non-Enforcement of Existing Laws.* If the existing laws, inadequate as they are, would be enforced the number of dental parlors would be reduced. But they are not. Why? Because the enforcement of these laws, in this State, is entrusted into the hands of the State authorities working in conjunction with the State Dental Societies.

Whenever a case of illegal practicing is brought to the attention of the authorities they refer same to the dental society having jurisdiction in that particular locality. As a rule the majority of the members of these societies are well-to-do practitioners plying their profession among the rich of the community, and not at all affected by the blighting influence of the dental parlor. Therefore their indifference.

Herein also lies the explanation why, so far, no earnest efforts have been made to force the State Legislature to pass more adequate laws that will protect the legal practitioner from the underhand methods of the illegal one.

4) *Competition.* In their anxiety to attract patients and increase their practice the dental parlors lower the price of dental work. The price that they are willing to offer their services for becomes the standard which the remainder of the dentists are forced to accept. Lowering prices necessarily means rendering inferior service. It means that the dentist is compelled, by the force of circumstances, to work against his very honest intentions unless he deliberately desires to commit professional suicide by earning that unenviable reputation "as a doctor without patients".

The general public has as yet to learn the lesson of the important relationship between bodily health and a set of sound teeth. It must also be taught the value of good, conscientious

professional service. In their ignorance they seek relief where it can be gotten cheapest, thus becoming the victims and dupes of the dental parlor's alluring signs and advertisements, of its empty promises and worthless guarantees.

What is the solution to this problem?

First, the immediate enactment of such laws as will prohibit, under penalty of the law, the ownership, control or management, directly or indirectly, of a dental office by a layman.

Second, the vigorous enforcement of future and existing laws not by the dental societies, but by the State authorities solely.

While the above-given remedies may temporarily improve existing conditions, yet we believe that the socialization of the dental profession offers the only permanent solution of the problem. Given a state in which every dentist will be under the direct control of the members of society he will have an opportunity to become in the real and full sense of the word a social servant. Once the incentive for profit is eliminated his ideal will be to serve his fellow man to the best of his ability. Only in the presence of social management and control will such an institution as the dental parlor disappear. Its existence will be an impossibility under the coming socialist republic.

All this is no "pipe-dream." The modern public-health movements are pointing out the line of development which the medical and scientific professions will follow in the future. They will aim, not to gain more dollars and cents, but service, social and humane service. But such a condition of affairs would be Socialism in Dentistry.



THE PROGRESSIVE DENTIST

Published monthly
by the

DENTISTS' STUDY CHAPTER
OF THE I. S. S.

Subscription price:
25c yearly to graduates.
Free to students.

Send all Communications to
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Vol. I January, 1912 No. 1

EDITORIAL.

With this issue of the "Progressive Dentist" we enter upon the troubled waters of journalism. Thackeray has said that with the issuing of every new newspaper or magazine the issuers thereof claim that there was a crying need for it and that humanity will be benefited thereby. While we do not

know whether there is a crying need or not for the "Progressive Dentist," we do believe that it has a function to perform. And while we do not know how far humanity will be benefited by it, we do know that the dental student and practitioner will.

The time has come, we believe, for progressive thought and action, both in the profession as well as in the social and political life of the dentist.

Thus we propose to bring to the attention of the dental student and practitioner new and progressive ideas that come forth in the profession and to widen his horizon with such social and political questions as affect the dental profession, chief among which is Socialism.

It will also be our aim to fight, via our humble pen, against whatever influences may be at work trying to degrade and sink in the slough of commercialism our cherished profession.

But to carry out this program we set before us we must have your co-operation. Will you help us?

FIELD NOTES.

On Friday evening, January 5th, at a regular meeting of the Chapter, Wm. Mendelson will lecture on "What Socialism Is." The lecture will be held at the Club Rooms of the Intercollegiate Students of Russia, 56 St. Mark's Place (8th Street), and will begin at 8 p. m. sharp. All students and practitioners are requested to come and bring their friends.

Dr. Wm. J. Robinson, editor of "The Critic and Guide," etc., President of the American Society of Medical Sociology, will lecture on "Three Means of Improving the Human Race," Friday, March 1st, 1912. Admission free. Your friends are welcome. Meeting hall will be announced in our next issue.

Dr. Wm. J. Robinson has the reputation as a fighter of all forms of charlatanism in medical practice and we congratulate the Educational Committee in being able to secure so able a lecturer.

On December 1st last we held a very successful lecture with Dr. H. Wheeler, who spoke on "Oral Hygiene." The auditorium of the Eclectic Medical College, given to us for that evening through the kindness of the Dean of the college, was crowded. After the lecture a number of questions were asked which brought out some interesting phases of the oral hygiene question.

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In November 1911, 41 Chapters of the Intercollegiate Socialist Society were in existence in as many colleges throughout the United States.

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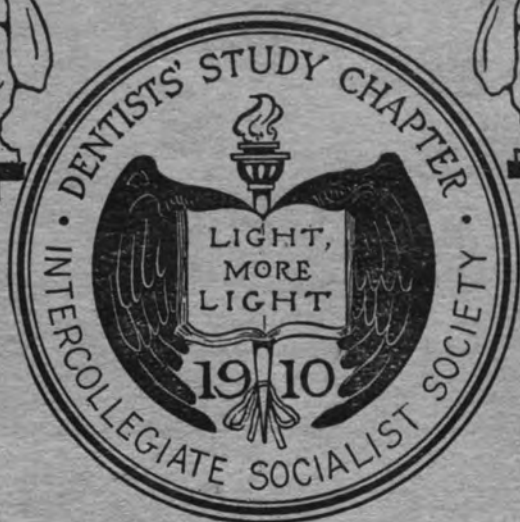
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THE
PROGRESSIVE
DENTIST



MONTHLY PUBLICATION

Vol. I. February, 1912 No. 2

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The Progressive Dentist

Vol. I

February, 1912

No. 2

A Plea for a National Law to Regulate the Practice of Dentistry.

BY DR. M. S. CALMAN.

The members of the dental profession often complain about the narrow and foolish legislation which prohibits a dentist from practicing outside of the State he has received his degree in.

The average graduate, after spending two or three years preparing for admission to a dental college, and after studying three years in a recognized school of dentistry, is finally admitted to the State Board examination. On successfully passing this final test of his professional fitness, why should he be subjected to more examinations if he desires to practice in a State other than the one in which he received the degree?

There are only thirteen States having reciprocal agreements, that is, recognizing each others' licenses. Why should there be only thirteen? Why not have "reciprocity" with all the States?

The following reasons why such a state of affairs exists may be considered:

1. *Low preliminary and college educational standards.* States requiring a higher standard of education do not reciprocate with those having lower educational standards, and rightly so.

2. *Self-protection.* Some States have reciprocal agreements with distant States, the latter having a lower educational standard. They reciprocate in order to enable their professional men to practice elsewhere if they find it desirable to do so, but shut the door to a neighboring State. This measure is resorted to ostensibly to protect the resident dentist from an influx of brother professionalists residing in the neighboring State.

3. *Desirable Exchanges.* Other States reciprocate on account of maintaining a low educational standard and are not, therefore, opposed to welcoming dentists with a better education.

4. *Need of Dentists.* States that are in need of dentists are willing to have reciprocal agreements.

The reasons advanced show plainly that there exists a chaotic state of affairs. To remedy it, a law providing for the issuing of national licenses for the practice of dentistry should be passed by Congress. Such a law should contain, amongst others, the following provisions:

1. Create a National Council of Dental Pedagogics, whose duty shall consist in prescribing a uniform preliminary standard of edu-

cation for all those wishing to enter a dental college. It should also enforce a high standard of instruction in the various colleges.

2. Compel all dental colleges to carry out the programme of instruction as prescribed by the National Council of Pedagogics. Failure to comply should result in the revocation of the licenses of said colleges to teach dentistry.

3. Create a National Council of Dental Examiners, whose duty shall consist in establishing a uniform standard for the examination of candidates for the license to practice dentistry.

A license thus obtained to be a national one, and consequently should be recognized by every State in the Union.

SOCIETY.

William Dean Howells in the New World

I looked and saw a splendid pageantry
Of beautiful women and of lordly men,
Taking their pleasure in a flowery plain,
Where poppies and the red anemone,
And many another leaf of cramoisy,
Flickered about their feet, and gave their stain
To heels of iron or satin, and the grain
Of silken garments floating far and free,
As in the dance they wove themselves or strayed
By twos together, or lightly smiled and bowed,
Or curtsied to each other, or else played
At games of mirth and pastime, unafraid
In their delight, and all so high and proud,
They seemed scarce of the earth whereon they trod.
I looked again and saw that flowery space
Stirring, as if alive, beneath the tread
That rested now upon an old man's head,
And now upon a baby's gasping face,
Or mother's bosom or the rounded grace
Of a girl's throat; and what had seemed the red
Of flowers was blood, in gouts and gushes shed
From hearts that broke under that frolic pace.
And now and then from out the dreadful floor
And arm or brow was lifted from the rest,
As if to strike in madness, or implore
For mercy; and anon some suffering breast
Heaved from the mass and sank; and as before
The revelers above them, thronged and pressed.

...The Progressive Dentist...

PUBLISHED MONTHLY BY THE

DENTISTS' STUDY CHAPTER, I. S. S.

Subscription price 25 cents yearly.

Free to Students

*All business communications should be addressed to J. S. CALMAN
26 E. 106th Street, New York.*

*All editorial communications should be addressed to Wm. MENDELSON
806 Sixth Avenue, New York.*

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EDITORIAL DEPARTMENT

The Esch bill, proposing to tax poisonous matches out of existence, is now before the House Committee on Ways and Means.

The ravages wrought by the phosphorus, used in the manufacture of matches, upon the teeth and jaw-bones of the workers engaged in the match industry is well known to all those informing themselves as to the diseases prevalent in our modern industries.

Every civilized country, according to Dr. J. B. Andrews, secretary of the American Association for Labor Legislation, prohibits by statute the use of phosphorus in match making.

In this country, which, as usual, lags behind all other civilized countries in the race for social and industrial legislation, there exists a deplorable, aye, a criminal condition of affairs.

Not only do many children die annually as a result of eating the tops of matches made with phosphorus, but the men, women and children employed in the match industry are subjected to early and frequent loss of their teeth. Due to the use of phosphor, their jaw-bones rot and have to be removed, thus disfiguring for life hundreds of faces. Such is the heavy toll which these workers have to pay in order to eke out an existence.

All the suffering and the disfiguring of faces resulting from phosphorus poisoning is directly traceable to the greedy manufacturer, who finds it cheaper—perhaps we ought to use the high-sounding term, “good business economy,”—to use white phosphor.

The editors of the dental journals, as well as the “high priests” of the profession, complain about the public's indifference in regard to oral hygiene. But, pray, has a word been said or a finger been raised to aid the workers who, as the victims of “phossy-jaw,” are most vitally concerned in the campaign against the use of phosphor?

The use of phosphorus—a deadly poison—and its imperative prohibition should have been brought, by the dental profession, to

Congress' attention long before the Esch bill made its appearance in our national legislative halls.

Why has not this question been studied by the very people who are best fit to handle it? Why has not the cause of the "phossy-jaw" unfortunates been espoused by the dental profession?

The answer is not to be sought far afield. Those affected happen to be only poor working people. "There's a reason," you see.

Now that the bill is before the House Committee, it behooves the dental profession, as well as the dental journals, to carry on a vigorous campaign in favor of its passage.

The facts concerning the dangerous effects of the use of white phosphor should become part of the "stock in trade" of those editors, officials and dentists who are in a position to bring pressure to bear upon our worthy Solons at Washington.

To aggressively take part in and aid the movement which seeks to abolish the chief cause of "phossy-jaw" would mean that a real step in advance has been taken towards bringing nearer the oral hygiene movement to those people who are most in need of it.

On another page our readers will find an article appealing to the student to study and investigate the Socialist movement and its principles.

We intend to publish, from time to time, articles dealing with the basic principles of Socialism. THE PROGRESSIVE DENTIST is not sanguine enough to believe that the articles which it will publish will convince the majority of our student body of the necessity of realizing the Socialist programme. But we do hope that they may act as a stimulus for further study on the part of the thoughtful student.

This, our first article, is only an "appeal," a warning notice, if we may put it so. The "goods" will follow.

FIELD NOTES.

On Friday evening, February 9th, at a regular meeting of the Chapter, comrade Robert W. Bruere will lecture on "The Professional Man and Socialism." Discussion after the lecture. Miss Rose Karasik will render some vocal selections. The meeting will open at 8 p. m. sharp, at 56 St. Marks Place (8th Street). All students and practitioners are requested to come and bring their friends.

Meet your fellow-students and members of the profession at the First annual **Full Dress and Civic Ball** given by the **Dentists' Study Chapter, I. S. S.** at Royal Lyceum 10 West 114th St., on **Friday Eve. February 16th, 1912.** Ticket admitting one 25 cents

Dr. Wm. J. Robinson, editor of "The Critic and Guide, etc., President of the American Society of Medical Sociology, will lecture on "Three Means of Improving the Human Race," Friday evening March 8th, 1912. at Schützen Hall, 12 St. Marks Place (8th Street) The lecture will begin at 8 p. m. sharp. Admission free. You and your friends are welcome.

COLLEGE STUDENTS, STUDY SOCIALISM: AN APPEAL

By HERMAN MENDELSON.

Of all modern social movements there is perhaps not one deserving a more impartial and thorough study than the Socialist movement. There are several reasons for this. I propose to discuss two.

First, the tremendous vitality and rapid growth of the Socialist party in this country behooves the earnest student to study it as the greatest political phenomenon of the times. Not only have the party adherents increased in number, but they have elected several hundreds of representatives to the various municipal and state offices.

The time is fast approaching when our capitalist legislators will be forced to consider every important item of legislation from the standpoint of the effect it will have upon the organized members and sympathisers of the Socialist movement.

The student who will read the above lines may perhaps say: "Why, this is politics, and I don't see why I, a future 'professional,' should interest myself in politics. I don't expect to become a politician."

Quite so, it is earnestly hoped that you will not become a politician in the ordinary sense of that term. But we, the Socialists, urge you to study politics and political movements because they have a decided influence in moulding the character of our educational, social and economic institutions. These institutions, in their turn, put an indelible stamp upon each and every member of a given nation or community. It is the duty of every individual, on reaching the age of independent thinking, to inform himself on public matters, because the higher development of the individual depends just as much on the character of our institutions as it does upon his own earnestness, knowledge and industry.

Secondly, considered from a purely educational standpoint, the study of Socialism is of great value. In the words of Prof. Richard T. Ely, of Wisconsin University, it may be said that "nothing in the present day is likely to awaken the conscience of the ordinary man or woman, or to increase the sense of responsibility, as a thorough course in Socialism. The study of Socialism has proved the turning point in thousands of lives, and converted self-seeking men and women into self-sacrificing toilers of the masses."

A study of Socialist principles will give you a broader view of and the real standpoint from which to analyze the social problems confronting this nation. The Socialist movement offers the real solution to those problems. You who are to-day college students may be called upon whenever a national crisis may arise to take an active part in it. A knowledge of Socialist demands will be of inestimable value to you, because they are destined to exert an ever greater influence upon the character and settlement of those crisis.

The capitalist colleges educate mostly the men who influence our public life. In the course of their public career they occupy important offices, such as state-attorney, court-judges, etc., and upon their convictions, feelings and mode of thinking depends a great deal the

manner in which they discharge their public duties. Being born into the capitalist class and educated by capitalistically-minded teachers and professors, these public officials naturally interpret men and conditions from the capitalist class standpoint. If they happen to be, for example, judges, they will dole out capitalist justice, which means class justice. In a word, all those trained to serve capitalism will faithfully do so, because capitalist class interests will dominate their thoughts and actions.

Has it ever occurred to you why the members of the class with which you, as a student, come in daily contact think differently than the members of the working class? Why does your professor look at things from one angle and the worker from another? Why does the standpoint of the intellectual class differ so much from the working class? For the simple reason that the economic interests of the two classes differ widely.

Capitalist hirelings, including editors, preachers and teachers, think not as they will, but as they must. The ideas which the teachers inculcate in your minds are of necessity colored by the views of the class which is economically and socially supreme.

The student with a capitalist mind thinks that he will be an independent intellectual or technical worker because he happens to possess scientific and technical knowledge which, in his narrowness of mind, he considers as his own. But lo! Our brother student is mistaken. The master class buys so-called brains and knowledge on the overcrowded intellectual market just as it buys its raw material on the economic market. The intellectual product of capitalism is just as much a commodity subjected to the laws of supply and demand as is the worker who has nothing but his labor-power to sell. As proof, we beg you to notice the hundreds of your fellow graduates going about knocking at the doors of capitalism's scientific and medical institutions begging for the opportunity to make use of instruments which they have not and cannot buy because they lack the price to pay for them.

Capitalism, besides appropriating the results of science and technique for its own industrial purposes, has also created a condition of affairs making culture and education the privilege of the few. Its existing institutions of learning give the lie in the face of those extolling the virtues of our democratic education.

Physicians, dentists and other professionals are sometimes classed as social servants. They are supposed to work for the benefit of society and not for their own selfish ends. Ethically considered, this may be true enough. But when you will realize, as the Socialist student does already, that capitalism makes it impossible for us to become real social servants, then you will join us in our efforts to educate and awaken the conscience of our brother students and professionals.

Now, what does Socialism propose? Briefly stated, the Socialist philosophy points out that the attainments of modern education are the result of centuries of social development, and, therefore, they should be the heritage of all men without distinction.

Socialism proposes to place the results of science and technique, by means of a systematically organized education, in the hands of the people, so that they may use it for the benefit of society instead of for the privileged few.

Socialism will not destroy culture, as some of our opponents claim. The Socialists do not, and cannot if they would want to, throw mankind back into barbarism. On the contrary, we want to elevate humanity to the highest level of civilization. We want to place educational opportunities within the reach of all, so that every member of society may develop according to his abilities and necessities.

This is the greatest goal mankind has ever had put before it. And it may very well realize it in this age, because it has the social, scientific and technical foundations to build upon.

The Socialist college student has bethought himself. He believes that you—the non-Socialist student—ought to be awakened to the realization of the fact that your mission is not fulfilled unless you join with the majority of the people—the working class—in helping to realize this goal.

SOCIALISM DEFINED.

By CHARLES H. KERR.

The word Socialism is a growing word. Most dictionary definitions tell only what the word used to mean. The latest dictionary definitions tell what Socialism looks like from the outside. But the word has come to stand for a very definite thing, that is to say, for a movement which started with the Communist Manifesto of 1848 and which now enrolls many millions of workers in all civilized lands. They know better than the dictionary-makers what Socialism means. These words of Liebknecht, a German Socialist, who until his death knew perhaps better than any other man the spirit of modern Socialism, explain briefly and clearly

WHAT SOCIALISM IS NOT.

Pity for poverty, enthusiasm for equality and freedom, recognition of social injustice and a desire to remove it, is not Socialism. Condemnation of wealth and respect for poverty, such as we find in Christianity and other religions, is not Socialism. The communism of early times, as it was before the existence of private property, and as it has at all times and among all peoples been the elusive dream of some enthusiasts, is not Socialism.

In all these appearances is lacking the real foundation of capitalist society with its class antagonisms. Modern Socialism is the child of capitalist society and its class antagonisms. Without these it could not be. Socialism and ethics are two separate things. This fact must be kept in mind.

WHAT SOCIALISM IS.

Socialism is the international movement of the wage-workers of the world for the destruction of the profit system, under which the tools of production are owned by capitalists and used for them by wage-workers, and the establishment of a system under which the workers shall own the land, the tools and the product. In other words, Socialism means the overthrow of the capitalist class and the abolition of the capitalist.

FUNDAMENTAL PRINCIPLES OF SOCIALISM.

As Professor Veblen has well said, "The Socialism that inspires hopes and fears to-day is of the school of Marx. No one is seriously apprehensive of any other so-called Socialistic movement." All the Socialist parties of the world are based on the principles first stated by Marx and Engels over sixty years ago. These are:

1. *Economic Determinism.*—The thoughts and feelings of any great mass of people, the customs they follow, the laws they make, the praise and the blame they express for different kinds of acts—all these are the natural and inevitable result of the way they get their living, the way they supply themselves with food and other necessities.

Apply this law to present-day Americans, and you will find them divided into two groups. The smaller, but up to now the stronger group, consists of capitalists, who live in comfort with little or no labor, because the people of the other group have to work for them.

The capitalists believe that to make profits from the labor of wage-workers is good, while for a wage-worker to steal from a capitalist or even to diminish his profits by taking part in a strike is bad. And the capitalists employ teachers, preachers and editors who hypnotize many wage-workers into thinking just as the capitalists do. But the more intelligent wage-workers have developed a new moral code of their own; they praise the worker who is loyal to the interests of this class, and they hate worst of all the SCAB—the traitor.

2. *Surplus Value.*—The wage-worker gets, on an average, what it costs him to live, no more, no less. The things he makes, which Socialists call commodities, exchange at just about their values, that is, according to the amount of labor required to make each commodity. Capitalists buy and sell these commodities. But the wage-worker has only one commodity to sell—his labor-power. He sells it for its value. But in two or three hours of the day he produces the equivalent of his wages; while he works from six to ten hours longer. In these hours he produces what Socialists call SURPLUS VALUE for the capitalists.

3. *The Class Struggle.*—This surplus value now belongs to the capitalists, because they OWN the land, the machinery, the raw materials. They pay the laborers their wages and they take the rest. And as machinery improves, the capitalist's share of the product ever grows larger, the worker's smaller. The capitalists

think this is right; so do the "good" workers, the ones who believe in the morals that the capitalist-paid teachers and preachers pump into them. But the clear-headed wage-workers, those who think for themselves, want to keep the good things they produce. They want to abolish the capitalists and become the owners of the tools they use and the things they make. The capitalists will not let go without a struggle. So the class struggle is on.

THE SOCIALIST PARTY of the civilized world, organized in every capitalist country, is the machine through which the wage-workers are carrying on their struggle. It is not their only machine. The unions are another. In France the unions are more revolutionary and aggressive than the party itself.

In America thus far the unions have for the most part been led by petty politicians who received favors from capitalists and carried on the union activities in a way to hurt the capitalists as little as possible. There are signs of change, and one of the most important tasks for the Socialist party in America to-day is to make the unions truly revolutionary.

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The Progressive Dentist

Vol. I

March, 1912

No. 3

An Erroneous Decison

BY DR. LEO. E. EVSLIN.

The Appellate Term of the Supreme Court recently denied that the knowledge of a dentist concerning his patient is privileged under the law as the knowledge of a surgeon, physician or nurse. The dentist's patients, that is the public at large, will hardly agree with this decision, for many patients, especially ladies, while they may willingly admit of having undergone an operation for appendicitis or the like, will not care to have their dentist advertise the fact of their having had a fractured jaw repaired or of being the possessor of a set of artificial dental substitutes. However, the above consideration is the least as compared with the much finer point involved in the decision, that is, the indirect denial that the dental profession is a part or specialty of the healing profession. While the nurse, who has no lawful right, for instance, to make a subcutaneous injection of any poisonous substance, is declared by this to be of the same jurisdiction as the surgeon or the physician, the dentist who is constantly engaged in the practice of minor surgery, and has the lawful right to prescribe and introduce substances of a very poisonous and dangerous nature while performing local or general anæsthesia or treating the teeth, the gums or other lesion in the mouth, is denied that honor.

The law in the form of legislative acts requires of the dentist an adequate education and examinations and the degree of Doctor of Dental Surgery, and, by virtue of this makes of him a member of the healing profession. The Supreme Court by this decision denies him the honor and the responsibilities connected with it.

It is not necessary to go far for arguments to prove the fallacy of this decision; the following citations from this decision prove it conclusively:

"Strictly speaking," says the court, "a dentist might be included within a description relating to those who practice surgery, but as the term surgery is employed in the statute it does not include one engaged in the practice of dentistry."

"Within quite recent times it was customary for barbers and blacksmiths to extract teeth. Formerly the work of filling and plating teeth was frequently performed by the jeweler. A process of integration and differentiation has come into existence."

"That this specialization has resulted beneficially to the community and that dentistry has now become a highly developed science, is doubtless true. But this fact does not militate against the construction of Section 834 of the Code of Civil Procedure, excluding a dentist from the operation of its provisions."

There also was a time, and not very remote at that, when surgery and medicine were products of human ingenuity to obviate pain and suffering rather than based on scientific principles, as it is today. It also underwent, as all sciences do, a process of integration and differentiation, before it reached its present state, and what is more, it is still undergoing this process in spite of its comparatively high efficiency. Dentistry in the forms of primitive specimens for the replacement of lost natural teeth, as found in the different museums, or as the rudimentary dentistry practiced by the blacksmiths, barbers or the patients themselves, was also human ingenuity to help themselves the best way they could in the effort to obviate pain and suffering. But what has this primitive dentistry in common with the dentistry of today? Surely not more than medicine of one hundred years ago with the medicine of today. Is not dentistry of today, strictly speaking, oral surgery, and do not men practicing it constitute a part of the healing profession? In order to treat a tooth must not the dentist have a knowledge of the anatomy of the same, the physiology, the pathology and embryology in connection with mechanics? In order to operate and treat the gums, the palate, must not the dentist know besides the above, the principles of general surgery, and lastly in order to perform anæsthesia, whether local or general, must he not have a general knowledge of the heart and the respiratory organs? In a word the dentist must know all the fundamental branches that make a science of medicine and surgery, and he is responsible before the law in cases of death resulting from negligence due to lack of this knowledge.

It seems but natural that if a man or a body of men bear the responsibilities of the healing profession, they should enjoy the privileges of the same, especially in the case where the divulgence of professional secrets in dentistry may create as much trouble as the divulgence of any secrets in connection with disease in general. Apparently the old truth "that in order that laws and ethics be beneficial and effective they must be in accord with the times" holds good in this case as well.

THE NEED OF PROGRESSIVE DENTAL SOCIETIES.

By DR. M. S. CALMAN.

The more dentistry is advancing, the greater becomes the need of progressive dental societies, in contra-distinction to the present inactive societies. Up to the present day, most dental societies have given too much of their time to the reading of papers on

dental subjects and to routine matter, which a committee could very well have disposed of. This routine work has been the cause of much personal abuse, the formation of cliques or factions and other very unprofessional acts on the part of the members of these societies. Little or no time has been devoted to the discussion of matters of great and immediate importance, which if carried out would be of great value to the community.

The writer of this article desires to present a program of activities, which our present dental societies or societies that may be organized in the future, would do well to adopt as their immediate working-program. It is as follows:

1. *The Education of the Public.* So long as the people remain in ignorance as to the important part the teeth play in the conservation of health, just so long shall we be guilty parties to the results brought about by the disease-breeding bacteria of a filthy oral cavity. It is our duty to see to it that in the present century no one should be left in ignorance of the value of sound teeth.

We can reach and educate the public by:

(a) A systematic distribution of leaflets written in a plain and attractive manner.

(b) Through the press, which is a most powerful educational factor.

(c) Through a series of public lectures, given in public schools and halls, and illustrated with stereopticon views, will prove both interesting and instructive.

2. *Recognition by the State.* Work for the enactment of a law, creating a Board of Dental Examiners to work in conjunction with the Board of Health. This Board of Dental Examiners should:

(a) Render practical talks to the school children from time to time.

(b) Teach the children the use of the toothbrush and mouth washes.

(c) Establish dental clinics in every public school building, for the treatment of the teeth of children whose parents can't afford to pay for service.

(d) Have incorporated in all school textbooks, a chapter on the importance and care of the teeth.

3. *Fight Corruption.* Work for the immediate enactment of laws that will abolish the dental parlors and all fake dental "offices." The present laws are inadequate. A *prison* sentence for a long term will do more to discourage the illegal practice of dentistry than the present insignificant fines do.

4. *National Recognition.* Work for the national recognition of the dental license, which is another important as well as progressive step in the advancement of dentistry.

Lectures on dental subjects by well-known men of the profession, and the reports of committees elected to carry on the work outlined above, should form the greater part of the program to be carried out at regular meetings of the society.

The above program ought to be adopted by all dental societies and if seriously carried out, would redound to the betterment of the community and the uplift of the dental profession.

CURING DISEASES

When some disease is studied the process of elimination is used to discover its cause. Thus in the efforts to find the organism that produces infantile paralysis, which is becoming an alarmingly prevalent scourge in this country, they take the blood of children and monkeys that have the disease and examine it under scientific rules and compare it with the blood of those not affected by the disease. By finding one element in the sick blood not found in the others they assume that such organism is the cause of the trouble. All diseases are thus being analyzed. Now if the study of social conditions were thus examined the causes of poverty, crime and other ills would soon be discovered—in fact, the cause has been discovered, but those who profit by the ills are in control of the law and refuse to permit the cure. The germ of private capital is everywhere the disturbing cause of social inharmony. Eliminate that and you have done away with the need of prisons, insane asylums, charities and courts. Were private ownership of productive sources not recognized, who would commit any kind of act, to say nothing of crime, to get possession of such things? When the only thing that can buy food, clothing, shelter, instruction and pleasures is the certificate of so much personal service in the production of these things, who would hold up a man or rob a house or a bank, or bribe public officials for gold or silver, when neither would buy any of these things? As things are today, crime is encouraged and made easy—for when you can get possession of money or capital, legally or not, you can have anything the market affords. Establish Socialism and no one could get any good out of any robbery or money or capital that they had not come by in the regular way. That may seem absurd to you, but it is nevertheless true.—*APPEAL TO REASON*

...The Progressive Dentist...

PUBLISHED MONTHLY BY THE
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Subscription price 25 cents yearly.

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EDITORIAL DEPARTMENT

As students and future professional men we lull ourselves in the sweet illusion that we have nothing in common with the working class and therefore all movements that tend to better their condition are either treated with indifference or ignored by us. And yet when one observes the condition of the average professional man of today he will find that his livelihood depends to a great extent upon the laboring class. It is they who form his clientele and his income fluctuates with theirs. One of the chief reasons why the income of the average dental practitioner or medical man is so small is due to the fact that the wages of the workers are so low that they leave but a small margin for dental and medical service.

Prof. Albion W. Small says: "No man can live, bring up a family and enjoy the ordinary human happiness on a wage less than \$1,000 a year."

The average yearly income of the American workingman is about \$600 a year. Investigators of the Association for the Improvement of the Condition of the Poor submit statistics showing that a family of five on a monthly income of \$72.90 will have only \$3.95 for doctor and dentist's bills, while an income of \$60 per month, throws that family entirely upon charitable hands as far as medical and dental needs are concerned.

The time has passed when the professional man could claim that his practice will be confined entirely to the middle class or the "rich" class. The middle class is constantly diminishing in numbers and its income decreases proportionally to that of the working class, while the rich bestow their favors upon those of their own class.

Our interests as professional men are closely bound up with those of the working class. It behooves us therefore not only to take a theoretical interest, but also an active part in all social and political movements that tend to better the workers' conditions.

Our cover page has been designed by the talented member of the Junior Class, N. Y. C. D., Mr. Jacob R. Schwartz '13. The beauty of it adds greatly to our magazine and the "Progressive Dentist" takes this means of thanking Mr. Schwartz for his contribution.

CHAPTER ACTIVITIES

On Friday evening, March 1st, at 8 p. m. sharp, a regular meeting of the Chapter will take place at 56 St. Marks Place (8th St.). Miss. Lena Robins will deliver a talk on "Forces Making for the Emancipation of Woman". Discussion will follow. Everybody welcome.

THE MAN

DR. WM. J. ROBINSON

Editor of the "Critic and Guide", etc., Pres. of the American Society of Medical Sociology, will deliver a talk on :

THE SUBJECT

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THE DATE

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THE PLACE

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On Friday evening, Feb. 16th the Chapter held the First Annual Ball, to celebrate the second year of its existence. The affair proved an all around success. Aside from the entertaining feature the affair acted as a sort of reunion of old acquaintances and the making of new friends. Those who attended the affair will long remember that day.

THE SOCIALIZATION OF DENTISTRY

By WM. MENDELSON, '12.

From a policy of "Man's inhumanity to man, that made countless thousands mourn" the world is gradually but surely turning to that of "Man's humanity to man, that will make countless millions happy."

In every department of human endeavor we see this policy applied. In our political life men are beginning to clamor that the policy of the government be the greatest amount of good for the greatest number. In our industrial life the protection of life and limb is being proclaimed by an ever increasing part of the world as of far more importance than profits to a few. And even in our commercial life that bugaboo of private property where no one has the right to interfere, the demand for government interference for the common good is ever increasing.

And so it is with those professions which are in the nature of social service, professions such as medicine and dentistry. At first the more advanced brothers of the profession formed organizations for the purpose of forcing their more practical brother to realize that the service he is giving to the community should be of vaster importance to him than his pecuniary reward.

The oral-hygiene movement of today is a step in the direction of turning dentistry into a profession for the common good. But this progress toward socializing dentistry is naturally slow because of the social system under which we live today, where profit and not service to one's fellow-man is the strongest incentive in life.

Did you ever stop to think what benefits dentistry would confer upon humanity, upon itself and upon the dental practitioner if it ever becomes socialized, I mean if it were turned into a profession where the dentist was employed by the state and where the great incentive would be to serve to the best of his ability the community in which he lives?

Think of the countless thousands of young children to-day that need dental work and which they cannot afford to get. In the City of New York alone, there are about two million cavities in the teeth of the school children that need attention.

Think of the countless thousands there must be throughout the country. Think of the millions of adults that need dental work of some form or other and are not able to have same attended to for pecuniary reasons. The value to the community in health from a proper attention to the dental needs of its citizens cannot even be appreciated today.

As for the profession itself, what could there be better than when the incentive would be service to your fellow-man instead of private gain? Men would do only the best and most conscientious kind of work because there would be no interest or gain to do otherwise.

Think what it would mean to the practitioner when his livelihood is insured so that he can enjoy life in its fullest sense, without having to compete with his fellow practitioner.

He could constantly perfect himself by way of study and practice without fear for the days when he would become old and unable to continue his calling, reaping the joy that comes to one feeling that he has done his best for his fellow-man.

I sometimes dream that it would be the golden age of dentistry, and who knows but that it is a dream that may come true.

WHAT SOCIALIST OFFICIALS WILL DO FOR HEALTH IN SCHENECTADY.

PART OF MESSAGE OF SOCIALIST MAYOR DR. GEORGE R. LUNN TO THE
ALDERMANIC COUNCIL.
Health the First Need.

We propose to go as deeply into the question of health as our power and resources permit. We place health first in our administration as the one consideration that should outweigh all others. As Socialists, we recognize it as part of the duty of the twentieth century State to assume the responsibility for the health of its citizens. We assert that in so far as sanitary science shows health to be a social question, government must deal with this problem.

We propose to use the whole force of the Health Department as an educational power. Through lectures, demonstrations and exhibits, we shall seek to enlighten the people as to those social conditions which are at the root of so much disease.

For this purpose I ask you to support the Health Department in its efforts to lay a deep foundation for the physical welfare of the community.

The administration proposes to establish a system of records which shall give details as to the health of the individual child from birth to the wage earning period. A maternity and infancy nurse, trained also as a social worker, will be appointed. It will be her duty to teach the expectant mother the proper hygiene of the lying-in period, the care of her infant, to watch and report upon the health of the child until the time of its entrance into school.

In the public school rigid inspection by qualified physicians will begin—cases of illness and deficiency will not only be reported, but will be followed up by nurses. The record of the child which

began at birth will be continued at the school. Then when the time to begin work comes and the child applies at the Health Department for a certificate, its record will be returned to that department. In this way the health of the future citizen will not only be kept constantly under guard by the city, but a mass of data will be compiled which should prove useful to students of social science as well as to all Socialists who will use these facts to protest against child exploitation.

We propose not only to inspect conditions for uncleanness, but to demonstrate through specially trained social workers how even under the difficulties of poverty a certain minimum of decency can be obtained.

Hindered though we are by unjust laws, we shall nevertheless use every available power to make it possible for the people to maintain their homes in the face of the deplorable conditions that tyrannize over them.

We recognize tuberculosis as a social disease preventable by social remedies. We assert as Socialists that tuberculosis is due to economic and social causes. The community is, therefore, responsible for the disease, and must act upon that responsibility by remedying the vile living and working conditions which produce it. So far as the laws permit we shall work with prevention as our first aim.

For those who are afflicted with the disease, we shall to the limit of our power provide the most modern scientific methods of cure. We shall do all we can to see that convalescent patients are not put at work which will hinder their recovery. But cure is second to prevention. The disease must be wiped out.

LOVE OR POWER.

By S. G. RICH.

It is frequently said by reformers that the Socialist attitude is all wrong. They want us to unite with them to get some one reform, to "clean up the city," or to "jail the grafters." They want us to appeal to "the moral sense of the people" instead of to the interests of one class.

How plausible this all sounds! How alluring to the sentimentalist! Yet it is founded on an entire lack of knowledge of how things happen to happen.

For example, they want all good citizens to unite on a fusion ticket to put thru some one or two reforms, which may be among our incidental demands. The history of reform and fusion parties in America shows us that very rarely have they achieved what they were elected to achieve, and that when they have done so, they have always put thru, also, other measures harmful to the working class. For these reformers are always petty capitalists, and unconsciously stand for the interests of that class alone. Shall we help *them* against ourselves?

We Socialists know that every party is the representative of some class and works in the interests of that class. We know that the interests of the working class lead them towards Socialism, and we are trying to awaken them to their interests. We know that all thru history, it has been POWER alone that has done anything. We don't see how "appeals to brotherly love" or to "the moral sense of the people" can accomplish anything that we desire; they have never yet accomplished anything at all.

We don't care particularly to "jail the grafters." Honest capitalist reform government is just as harmful to the working class; it isn't even going to give a little here and there to keep itself in office, as do the "crooks." As long as Capitalism lasts, it is a matter of no importance to us to "clean up the city." When we get hold of it, the reformers won't like our cleaning up, for they will be cleaned out along with the rest of the capitalist class.

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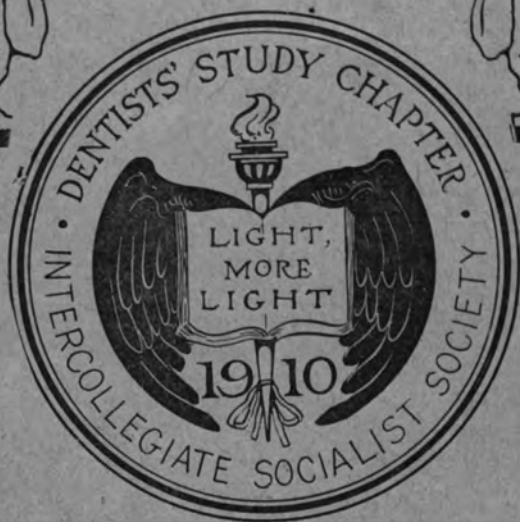
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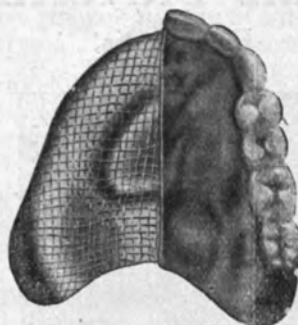
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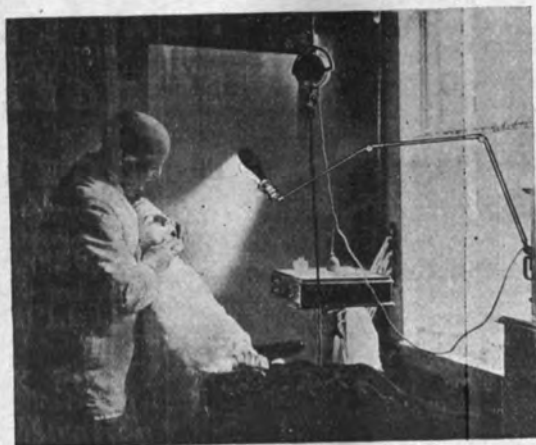
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The Progressive Dentist

Vol. I

April 1912.

No. 4

OUR INADEQUATE DENTAL LAWS

By Adolph Lappner, M. D., D. D. S.

Of all the professions abounding today the one in which the dentist is engaged stands out conspicuously as being indifferent to its own interest. Even the trades know how to protect and maintain themselves with dignity.

This state of affairs is due to the fact that professional education is both a State and private matter. The consequences are that every State seeks to make severer laws for those dentists who have received a high-school education. Some of our legislators as well as the legislative committee of the State Dental Society, are now at work devising methods whereby to augment the difficulties in the way of those who are striving to comply with the legal requirements to obtain the degree and later on, the right to practice dentistry.

I want it understood that I am not opposed to such measures, but I want to point out the fact that while much attention is paid to the preliminary requirements for admission for the study of dentistry, little or nothing is done in the way of protecting the legal practitioners from the illegal practice which if left unchecked may reach, I fear, the stage of a *trust* of dental companies.

The dental parlors, in the majority of cases, are owned by former agents or salesmen. They employ as a rule non-licensed dentists and very often operate themselves. They defy the present dental laws and are a source of untold misery to the patients who become their victims. Our legislators have no idea of the extent of the injuries inflicted upon the poorer section of the public and, therefore, they do not bother about enacting better protective laws.

Every European country, whenever the question of protecting the public's health arises, does its best in enforcing laws designed to eliminate the professional charlatans. They also enforce a high-standard of education, thus reducing the number of aspirants seeking a medical or dental degree. In this manner a process of weeding out actually occurs during the required period of study.

As an illustration typical in other European countries, I want to mention here something about the laws of Roumania and Germany.

In the former country the majority of the medical men engaged

mechanics to operate at the chair. The minority of the M.Ds., who took special courses in a dental college considered this as a great injustice to themselves. The Sanitary Service, therefore, passed a law which is now in force, that only those medical men who possess a dental diploma from a foreign country where they had the right to practice shall be allowed to engage in the practice of dentistry.

In Germany, where the laws are more liberal than in the United States, the legal practitioner's sign reads *Praktischer Zahnarzt* (practical dentist), while the mechanic's sign must read *Zahntechniker* (mechanical dentist). So that, when one goes to an office he knows whether a dentist or a mechanic is to perform the required dental work.

In this country, in some states where the requirements of admission to the State Board examinations are not even as high as those in New York State, there are laws making it possible for the public and the dental inspectors to keep track of the dental parlors, to force them to observe the laws.

There are in New York State a number of dental societies. On one hand we have the so-called State Dental Societies, whose members are strictly ethical dentists because they were fortunate enough to establish a practice in a rich neighborhood and can afford that their signs should not exceed 24 inches square. On the other hand, we have those whose signs exceed 24 square feet, and are not admitted to membership because they are not ethical in *this* respect. Circumstance compels the latter to open offices in the poorer neighborhoods where a dentist is estimated according to the number of signs he displays. In this very neighborhood we find the majority of dental parlors under different trade names that in themselves are a drawing card. The dentist who starts practicing in an ethical way in the midst of this gentry is soon forced down to their level and resorts to the dishonest methods employed by the dental parlor.

The legislative committee of the State Dental Society is not raising a finger to protect the profession and the public. As proof we can point to the increasing number of illegal dentists. If this committee cannot or does not care to check this steady increase, then let them resign and another committee be elected that will do the work for which it has been called into existence.

For controlling the dental parlor evil I would suggest the following:

1. Every dental parlor must be registered once a year with the Dental State Board.
2. The owner of a dental parlor must notify the State Board as to the number of registered dentists he employs and every time he engages a dentist he must notify the Board at once.

3. The dental parlor must have a sign posted at the entrance to the office bearing the name or names of the dentists it employs and in front of the operating chair shall be posted the certificate of registration.

4. In every dental district a committee of three registered dentists shall be empowered to inspect the dental parlor so as to ascertain whether they comply with the laws.

5. Any violation of the dental laws shall be considered a misdemeanor punishable by fine or imprisonment, or both.

Establishing a Board of Dental Examiners

By Dr. M. S. Calman.

Dentistry, in the last few years, has attained front rank among the healing professions. The importance of sound teeth to the conservation of the body, is becoming more and more evident. Recent research work has traced a number of diseases to carious teeth.

The oral cavity is an ideal place for the propagation of all kinds of bacteria. When food is ingested, along with the bolus are carried innumerable bacteria into the stomach and the alimentary canal, where they set up all kinds of trouble. Infection takes place also by way of the capillaries of the pulp, when this organ is exposed as in the case of extensive caries.

The more these facts become known, the greater becomes the cry for the proper care of the teeth. More so is this the case with our public school children. They are the greatest sufferers from neglected teeth, which result in improper development of body and mind. Tonsillitis, nose, eye and ear troubles, from which the children suffer a good deal, in a great number of cases can be traced directly to a filthy mouth, which in turn is due to caries of the teeth. The reason parents pay little attention to the condition of their children's teeth, is because they have as yet not been taught the importance of sound teeth to the general welfare of the individual. If a child suffers with "tooth-ache" the parent insists that the dentist extract the offending tooth, for, they say, "the child will get another one in place of this one." That is as much as they at present know of the importance of conserving the children's teeth.

The government has taken upon itself the education of its youth, why should it not also take upon itself the prevention and cure of diseases that from time to time afflict the public school children? For health is of prime importance in the education of the young. A healthy body means a sound mind, and only a sound mind can assimilate knowledge. Of prime importance to the health of the individual is the proper care of the oral cavity. The physician may succeed in relieving constitutional disturbances due to a filthy mouth, but you may rest assured that the cure is but temporary and that the disease will occur again, notwithstanding all the drugs which may be taken.

Let the State government, then, set up in conjunction with the Board of Health, a Board of Dental Examiners. The duty of this Board to consist in:

1. Incorporating into the text-books a chapter on the importance and care of the oral cavity, written in a way that the children should understand it.
2. Explain to the teachers how to instruct the children in the uses of the tooth brush and mouth washes. This to be regularly done a few times a week.
3. Examine the children's teeth from time to time, and in the event of carious teeth being found, to compel the parents of such children to take them to the family dentist for treatment. Vaccination, remember, is also compulsory.
4. Establish a clinic in every public school building, where children of the poorer classes shall receive free treatment, at the hands of an experienced dentist.
5. Deliver a series of lectures on the oral cavity, in conjunction with the Free Public Lectures at present given under the auspices of the Board of Education, to the general public.

The health of the future citizens of this wealthy republic ought to rank highest in importance to any other question. We find the government lavishly spending fortunes every year in instructing the farmer how to make his land more productive, how to raise chickens, breed cattle successfully, the care of pigs, etc., but the same government woefully lacks initiative when it is a question of preserving the health of its citizens. But the time is coming, and that sooner than you, reader, may think, when the government machinery will be in the hands of the members of the Socialist Party, which alone of all parties, is pledged to the reorganization of society on the basis that the health of its citizens is of *prima-facie* importance.

Chapter Activities

A very important meeting of the Chapter will take place on Friday evening, April 5th 1912, 8 P. M. sharp, at 56 St. Marks Place (E. 8th St.) A lecture on a very important topic will be delivered followed by discussion. Also very important business to transact.

As there will be no meeting in May—the next regular meeting taking place Friday, June 7th,—all the members are therefore urged to be present on the 5th inst.

On Friday evening, March 8th, Dr. Wm. J. Robinson, editor of the "Critic and Guide", etc., delivered a very interesting lecture on "True Eugenics—Three Means of Improving the Human Race". A number of questions were asked to which Dr. Robinson gave very instructive replies.

...The Progressive Dentist...

PUBLISHED MONTHLY BY THE
DENTISTS' STUDY CHAPTER, I. S. S.

Subscription price 25 cents yearly.

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EDITORIAL DEPARTMENT

In another part of the magazine we are printing a very interesting letter sent us by one of our readers, apropos the article in our last issue, "The Socialization of Dentistry."

The writer begins by stating that socialists differ among themselves as to what socialism is. Our experience is that while socialists differ as to tactics, the majority of socialists are agreed as to its theory which the writer states correctly is "the collective ownership of all things that should be used by the people collectively and the private ownership of all things used by the people individually."

There are many things that the state should not control; he claims particularly the "State control of Dentists." We did not advocate the state control of dentists, but the state control of Dentistry. We believe dental and medical treatment should be given free to the people just as education, if the great majority of the people are to receive the benefits that these two professions have in store for them, and not be the means whereby some practitioners by various methods become rich.

As for the oversupply of dentists we have no fear of that. We believe that there are many dentists today who would make better shoemakers and vice-versa, and under a system of society where the remuneration of the shoemaker and his social position would be in no way inferior to that of the dentist, he would take to shoe-making instead of dentistry. Besides, if the teeth of the people were properly cared for the 40,000 dentists in the country today are in no way sufficient for the work.

"A great deal is being done already for the poor in this respect, and we should be first in advocating this kind of philanthropy, but the way to do it is not to label it socialistic," says our correspondent.

It is philanthropy today, and a poor philanthropy at that. We are not advocating the care of the nation's teeth as a form of philanthropy, but as a necessary function of the state.

Mr. Merrill, the socialist member of the assembly, we just learned, has introduced a bill in the legislature for the free care of the teeth of all school children of the state. Would the writer not have us label it *socialistic* when the bill emanates from the socialists, it's introduced by a socialist and fought for by them for fear of it not being adopted?

Let me whisper into your ear that the people are watching today our assemblymen and congressmen as never before, and many a "socialistic" bill will be passed for fear of losing the confidence of the people.

Below we print the bill introduced by Mr Merrill, the Socialist assemblyman, which empowers the Board of Education to have the teeth of all school children examined at least once a year and treated from funds to be provided by each city or district in which such school is situated.

Here is an opportunity the dental societies and the profession at large ought not to let slip by without doing their utmost.

First. If the bill is passed it will be of untold value to the thousands of school children that need dental treatment.

Secondly. It will establish the recognition of dentistry as an aid to the healthy development of the minds and bodies of the children.

Thirdly. It will give state recognition of dentistry by placing the dental surgeon upon the same footing as the physician, as a servant of the state.

A great deal of money was spent and a great agitation has been carried on to place the dental surgeon upon the same status as the physician in the U. S. Army. Why not do the same when it means not only the recognition of dentistry as a necessary adjunct to education by the state but also the well being of thousands of future citizens.

We especially call upon all those societies who preach so much of oral hygiene, of the relation of the dental surgeon to the public welfare, etc., to send representatives to appear before the Committee on Public Education where the bill was referred and urge upon them to recommend same favorably to the house.

We also ask all practitioners to write to their representatives in the assembly, urging upon them to pass the bill.

AN ACT

To amend the education law, in relation to the powers and duties of board of education

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

Section 1. Subdivision twenty-one of section three hundred and ten of chapter twenty-one of the laws of nineteen hundred and nine entitled "An act relating to education, constituting chapter sixteen of the consolidated laws," as amended by chapter one hundred and forty of the laws of nineteen hundred and ten, and further amended by chapter six hundred and two of the laws of nineteen hundred and ten, is hereby amended as follows:

21. To provide for the medical **and dental** inspection of all children in attendance upon schools under their supervision [whenever in their judgment such inspection shall be necessary] **at least once during each school year and the result of such examinations shall be made a part of the school records and a copy of the examinations of each child shall be furnished to the parents or guardian of each such child** and to pay any expense incurred therefor [out of funds authorized by the voters of the district or city which may be properly] **funds shall be provided by the district or city or** set aside for such purpose by the common council or the board of estimate and apportionment of a city.

§ 2. This act shall take effect September first, nineteen hundred and twelve.

EXPLANATION:- Matter in **heavy type** is new; matter in brackets [] is old law to be omitted

We have just learned that the Harlem Dental Society, at a regular meeting held on Thursday evening, March 28th, 1912, has instructed its Secretary to send a letter of indorsement of the above bill, to Assemblyman Merrill; also the law committee of the society was instructed to communicate with all other dental societies in the state, with a view of having them take favorable action, in order to insure the successful enactment of the bill into law. The members were also urged to write personally to the Assemblyman and Senator of the district in which each resides, and ask their support of the bill.

In view of the fact that many students are absent from college owing to the approaching exams, the Progressive Dentist will be sent to them by mail, free of charge. Most of the names and addresses of the students have been secured. Those whose names have not been secured, are asked to see or write to the manager, Mr. J. S. Calman.

HOW CAPITALISM AROSE

By Herman Mendelson

Socialism is a philosophy of history, a system of political economy; yes, even a business proposition, if you will. It is all these and more. It is a world-wide political movement having definite principles and definite demands. But in order to understand any phase of the socialist philosophy we must know something about the economic forces that brought about our present industrial order known as capitalism. It is necessary for a clear understanding of the socialist program to have a clear conception of the industrial development thru which society passed. Besides that, a study of the scientific basis of the modern socialist movement will show you that it is based on the nature of the several stages of industrial development that preceded our present capitalist society.

Industrial evolution teaches us that primitive man lived like the animals, on whatever nature had to offer. That in the course of time he began to devise tools. He became fisher, hunter, herdsman, finally farmer and craftsman. This development went on thru the centuries. The way in which people get their living is directly dependent upon the means of production, the tools and raw materials they have at their disposal. The different forms of society, in their turn, depend on the manner of production. When men rely on hunting and fishing for a living, they are very different individuals from what they are when they lead an agricultural life, or when they satisfy their wants by means of large accumulations of capital.

The individual tool was the means of production of primitive man. As the individual owner of the tool he enjoyed the product thereof. But as the means of production changed, in the course of advancing civilization, the notion of ownership also changed. Right here it's appropriate to remark that nothing is stationary in life. That in society just as in nature a continual development goes on. A change in our ethical or social notions corresponds to a similar change in our economic environment.

Capitalistic society begins with agriculture and handicraft. The agricultural family produced all it needed. With the advance in farming methods more than enough was produced to satisfy the immediate needs of the family. It placed the family in a position to exchange their product for weapons, tools and other articles which they could not produce. This led to the appearance of production for exchange. Exchange products became commodities. There is a distinction, for instance, between the corn which the farmer raises for his own consumption and that which he sells. The former is not a commodity, the latter is.

Exchange of commodities implies two conditions: (1) Division of social labor; (2) Private ownership of the things exchanged. Due to the development of division of labor and the increase in private property, production for exchange became more general. This form of production gave rise to buying and selling. People began to make a living by selling dearer than they bought. As a result of this form of exchange the trading class arose.

The farmer or craftsman buys for consumption, the tradesman buys in order to sell. Money used for this purpose is capital. The shoes a merchant buys to sell is capital, that which he buys to use is not. It is important to note this difference because the defenders of the present system try to befog the average man's mind, so that he may not see the difference between the ownership of an object intended for personal use and the ownership of a branch of industry upon which countless people depend for their livelihood.

The craftsman depended on his industry and skill. Whatever he produced was his because he owned the tools he used. His industry tho' never went beyond a fixed limit, because all he had to invest limited itself to his capacity to work, while that of the tradesman was determined by the amount of his capital.

Here is a condition which led to further social development. We started with a state of society in which each member owned the means of production, in which the individuals were equally equipped, and arrived at the industrial stage in which they set out unequally equipped in the struggle for bread.

Private property in the means of production was necessary for the good of society when the average man had a chance to own property. But the economic conditions making possible such ownership have passed away and with them the nature of the ownership also changed.

How has this happened?

During the middle ages the handicrafts developed steadily. A great increase in the division of labor took place and tools were improved. Trade developed as a result of improved means of transportation. When it was at its highest point, the European monarchies cast about for the acquirement of new colonies. The tradesmen that were able to fit out ships with unscrupulous crews got the greatest share of the proceeds of these colonies. England and Spain were the leading colonizing nations on account of their powerful trading classes.

In looking for a shorter route to India, America with its immense supplies of gold and silver was discovered. The colonies soon became the chief sources of wealth from which the empty monarchical coffers were replenished. Their inhabitants were plundered and oppressed. The history of colonization, if it shows anything, shows us that capitalism was ushered in thru piracy, smuggling, slave-trading and war.

During this period of commercial adventure and activity the modern state had its beginnings. The state met the demands of the rising capitalist class and depended upon it for financial support. By virtue of the influence which money gave them, the capitalists were enabled to force the political and military power of the state into their service. The state was obliged to improve the highways of communication, take over colonies and carry on wars in the interest of capital.

The newly discovered lands and commercial routes opened new markets. The demand for continental goods grew. As handicraft was unable to satisfy the increasing demands, production on a large

scale was imperative. The merchants found it profitable to meet these demands. They had the money to buy the raw material, build factories and employ labor. But as the process of the depopulation of the rural districts had not begun as yet, the rising manufacturers found it difficult to obtain the necessary labor. In this he was soon aided by the landlords who desiring a share of the new prosperity demanded a larger portion of the agricultural product. The tillers of the soil not being able to meet the demand were deprived of their land and were forced to the doors of the new factories. Thus capitalist industry began by means of expropriation, by confiscation. It deprived the peasant of the land which he had inherited, for centuries, from his forefathers.

The use of steam-power in manufacture, made possible by the great mechanical inventions of the latter part of the eighteenth century, brought about that far-reaching and rapid change known as the Industrial Revolution. It ushered in the era of capitalism, the wage and factory system. The laborers were forced to leave their homes, throw their simple tools upon the scrap-heap and assemble in factories in order to use the costly machinery which each one could not own for himself. Economic evolution brought about the first requisite of capitalist production, i. e., the separation of the masses of workers from the means of production.

When machinery was first introduced the workers revolted, they resorted to violence. They thought that by destroying the machine they would also wipe out the unbearable conditions under which they had to suffer. Appalling abuses were prevalent in the English factories. Men, women and children worked under conditions that destroyed both soul and body. To attempt a description of those abuses or of the changes that took place in men's ideas regarding the duties of the state in regulating the rising industries with a view to the amelioration of factory conditions would carry us too far afield. Suffice it to say that they form a blood-stained chapter in early capitalist history.

Along with the introduction of machinery division of labor was also introduced. This system of production became so developed that each operative had to perform but a single operation. The machine conquered industry after industry. It enabled the factory worker to do the work of several hundred handicraftsmen.

In this country a complete evolution in the method of production took place in the last decade before the Civil War. Improved machinery was gradually introduced into every branch of manufacture. Inventions multiplied rapidly. Between 1840-1850 patents were granted at the rate of 646 per year. The most notable of the inventions affecting manufacturing was Elias Howe's sewing machine which he brought out in 1846. Its most important application was made in the manufacture of shoes. In 1861 McKay invented a machine for sewing soles to uppers more cheaply than pegs could be driven. The invention of the automatic needle enabled a skilled workman to sew the soles on to nine hundred pair of shoes in a ten-hour day (U. S. Census,

1900). As an illustration of the effects of machine-made goods, it may be mentioned that the cost of the machine-made shoes was reduced to one-eleventh of that of the hand-sewn article.

Today, improved machinery, increased division of labor and thoroly centralized industry makes it possible for the workingman to produce, according to Census Bulletin 150, nine times as much as fifty years ago. This change was brought about by revolutionizing the method of production from an individual to a social or co-operative basis. Take the shoe industry as an illustration. While formerly, under the old handicraft system, a pair of shoes was made by one man, it takes now sixty men to produce the same pair of shoes because sixty separate and distinct tasks are involved in their making. But these sixty men can produce many times more shoes than an equal number of men could have done on the individual plan. And this because today everything is done co-operatively. The modern factories are co-operative institutions. There is co-operation in production. Only when it comes to the distribution of the worker's product there is "division." The rewards of modern industry are reaped by the capitalist class in the form of increased profits.

It results from what we have considered up to now, that capitalism is the direct descendant of the old handicraft system and that its main feature is the private ownership of the means of production and distribution. This social transformation brought about a condition wherein the worker is deprived both of the tool and its product. It created a wider and wider breach between the property-owning and propertiless class. The struggle between these two classes which has been going on for centuries became more intense. But inherent in this transformation were the seeds of a great movement which was to arise and put an end to all class-struggles. That movement is today represented on the political field by the Socialist Party.

Consider for a moment the so-called blessings the workingman enjoys under capitalism. Briefly stated, he works the most but has the least, while those that do not work at all and employ others to work for them have the most. There is poverty for the worker, riches for the shirker. The workingman produces all wealth but is prevented from enjoying its benefits. Not only is he forced to sell his labor power on the capitalist market, but he sells it that he may be better exploited.

We Socialists claim that this exploitation ought to be done away with. We also say that palliative measures or superficial reforms that only alleviate the symptoms of capitalism will not do it. That we must attack the cause of this exploitation, which, as we have seen, is the private ownership of the socially necessary means of production and distribution.

The Socialist Movement is here to educate the workingman to a realization of his power. It points out to him that the present anomaly of things in our economic life will cease as soon as he will capture the powers of government and run the industries in the interest of all the people instead of in the interest of the few as they are today.

LETTERS TO THE EDITOR

Dear Editor:

The trouble with Socialism is that too many Socialists do not understand Socialism. Ask half a dozen Socialists what Socialism is and they will give you six widely differing answers; ask the same question of half a dozen anti-Socialists and they either do not know or have erroneous ideas. I make this introduction because it leads to the discussion of the interesting article in your last month's issue on "The Socialization of Dentistry."

Socialism, I have been taught and like to believe, is the collective ownership of all things used by the people collectively and the private ownership of all things used by the people individually. For example, shoes are required by people almost universally but in order to manufacture them it is necessary to collect together very ponderous and costly machinery in a costly building and run the machines at enormous expense. One selfish, narrow-minded individual, if he wishes, because he possesses these means of manufacturing and because he can produce an artificial scarcity of the supply, can withhold the product from the public or sell it with extremely high profit to himself. It may, therefore, be advisable to control this industry for the benefit of the people, and Socialism so proposes. Now, the same shoes, once in the hands of the individuals who purchased them, are no longer socialistic or common property and Socialism cannot properly lay any claim as to how or what the owner should do with them. No sane person could advocate the ownership by the state of those shoes, any more than they could the public ownership of tooth brushes, yet very intelligent people will tell you seriously that under Socialism personal property would have to be divided.

Besides shoes, there are many other valuable assets which the state should not attempt to control. Most important, to my mind, is labor. Often, altruistically minded Socialists look far in advance of Socialistic doctrines as laid down by the teachers, and advocate policies which Socialism does not include or wish to include. Such a policy is the one advocated by Mr. Mendelson: The State Control of Dentists. As Mr. Mendelson ably states it is an ideal condition of a golden age when men will think more of their fellowmen and not so much of themselves. It introduces complications and difficulties which, with our minds trained in the selfish ways of past centuries and our environments such as present themselves now and will for centuries to come, we cannot solve.

I do not believe the state could ever completely control any industry or profession, for if it should attempt to do so with dentistry, for example, and an over-abundance of the supply should develop, what would the state do? Refuse to employ the surplus? Surely, that does not seem just. Limit the number permitted to study the profession? Obviously unfair. Why prevent a man from seeking the livelihood for which he feels he is

best fitted or exclude men who may develop into geniuses, inventors and discoverers?

"Think," says Mr. Mendelson, "what it would mean to the practitioner when his livelihood is assured so that he can enjoy life in its fullest sense, without having to compete with his fellow-practitioner—without fear for the days when he would become old and unable to continue his calling." "Enjoyment of life in its fullest sense" is a very broad term and I doubt whether we could agree upon its meaning, but whatever your views or ideas are, I advise you to be most modest if you wish to gratify them with the salary the government is wont to pay. And in regard to dispelling our fear of old age, surely the government's pensions are hardly sufficient for the gratification of our every desire.

There are undoubtedly thousands of people who are neglecting their own teeth and the teeth of those dependent on them because they cannot afford to pay for treatment. The undertaking, by the state, of the care of this class of patients, cannot be too strongly advocated. But that is not socialism; that is philanthropy.

That a great deal is being done for the poor is not generally known by the profession in general. The educational departments are working very energetically and I saw a report of one examining doctor in which over 1,500 cases had been referred to free dental clinics. In New York City there are at present 15 such clinics where treatment is either entirely free or nearly so. Some charge a registration fee of 10 cents, presumably to reduce the humiliation incurrant upon the reception of charity. Some do work at cost or a little less, as evidenced by a plate costing but \$1.50, a gold filling 50 cents.

In a small town in Virginia of 50,000, 34 dentists were accepting all charity cases sent them and I believe a majority of our local dentists are making the same practice.

However, this kind of philanthropy should, undoubtedly, be carried out by the state and your paper should be foremost in advocating it.

Let me whisper this: the state hates to accept any idea which seems socialistic, so when you have a reform to advocate do not be so hasty to attach the title "socialistic" to it with the hope of bringing the credit to the ranks of socialism. Rather get the suggestion adopted first and you will have lots of time later to place the credit where it belongs.

Yours very truly,

CHARLES WOLFF,
N. Y. C. D. 1914.

Dear Editor:

I am in receipt of the "Progressive Dentist," for which accept my thanks. I quite agree with you on your article "A Plea for a National Law to Regulate the Practice of Dentistry."

Very truly yours,

A. LIPSCHITZ, D.D.S.

SOCIALISM AND PUBLIC HEALTH

By W. R. Shier

I was asked by a physician the other day how the Socialist party would cope with the question of public health.

I replied though the Socialist party had not as yet addressed itself especially to this problem, it could be expected none the less to make public health one of its chief concerns when it attained a fair measure of governmental power.

But this general statement did not satisfy my friend. He smiled at me somewhat contemptuously and remarked that Socialists seemed to have only glittering generalities instead of definite measures to offer the electorate.

"How do you Socialists," he asked, "ever expect to inspire confidence in your party unless you bring detailed knowledge to bear upon public questions and show the people that you know how to solve the various problems that confront them here and now?"

"It is all very well," he added, "to theorize about social evolution, to paint pretty pictures of the future, to denounce the evils of the present, to attack the old political parties, to expose the class character of modern institutions, and to point out that private property in the means of wealth production must eventually be done away with. I sympathize with all that, but I want to know, and what thousands of other broad-minded people want to know, is what stand Socialist party candidates will take upon the various questions that must be solved within the next two or three years. But you Socialists seem to live rather in the pink clouds of romance or the black depths of despair. It's too bad that you have gotten into these ruts, for if you were as well versed in State and municipal problems as you seem to be in the statistics of poverty you might accomplish something worth while."

I ventured to remark that a thorough knowledge of social evils and their causes along with an understanding of historical tendencies was essential to those who sought to bring about human betterment.

"Yes! Yes! Yes!" the doctor replied impatiently, "but you fellows never seem to get beyond the stage of analysis and denunciation."

That put me on my mettle and I proceeded to mollify my critic by telling him that Socialist governments would take care of the public health in the following ways:

By shortening the hours of labor, thereby reducing the time spent in the dust-laden, poisonous air of mines, factories, stores and offices.

By enforcing clean, healthy, sanitary conditions in all industrial establishments, by safeguarding the employees against dangerous machinery and avoidable accidents, by securing for them as much fresh air and sunlight as practicable.

By building model tenements and homes for working people and renting same to them at a price sufficient only to cover the cost of construction and maintenance.

By abating the smoke nuisance in cities and separating the residential from the factory districts by stretches of woodland.

By spending any sum of money necessary to secure a pure water supply, and, until dairies are municipalized, compelling milk venders and milk producers to observe the greatest cleanliness in order to prevent their supplies becoming infected by the germs of tuberculosis and typhoid fever.

By fighting the unscrupulous adulteration of food by manufacturers and, as rapidly as possible, bringing all food producing industries under public control.

By educating the people in hygiene, sanitation and the care of the sick through illustrated public lectures, special exhibition and the free dissemination of literature.

By the multiplication of public baths, supervised playgrounds, school gymnasiums and public breathing spaces.

By the free medical treatment of all dangerous diseases, by the erection of immense public hospitals to take care of the sick, and by providing substantial, well-cooked, scientifically-prepared nourishing midday meals to school children instead of sending them home at noon hour.

By the establishment of a National Department of Health that would co-ordinate the work of State and municipal boards of health, gather information of value to the public, conduct special investigations and do for human beings what the Department of Agriculture is doing for pigs and corn.

"Excellent! Excellent!" cried the doctor, "but how will Socialist governments raise the immense sums of money with which to carry out this admirable program?"

"They will raise the money," I replied, "by wresting back from the rich most of the wealth they succeed in mulcting from the poor. They will do this through graduated income taxes, heavy death duties and the appropriation of unearned increments. Another source of revenue will be the industries that are brought under direct government control. However, the hundreds of millions of dollars that are now being squandered by Republicans and Democrats upon engines of destruction will be used to save life instead of destroying life. The Socialists believe that arbitration treaties plus the international solidarity of the working class will bring the abolition of armies and navies within the sphere of practical politics."

My medical friend wished to continue the discussion, but that was enough for one day.—From "New York Call."

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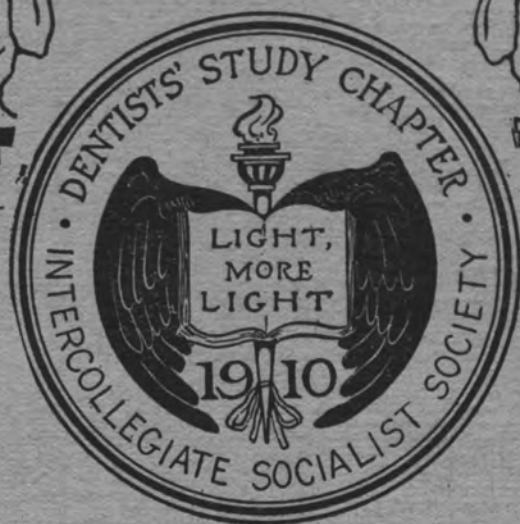
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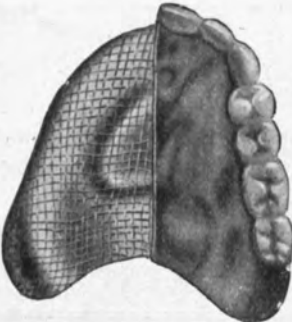
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No 5

Immunity and Ehrlich's Side Chain Theory

By Leon Harris, M. D.

The subject of Immunity, Predisposition, Susceptibility, and resistance are part of the daily vocabulary of the medical student and practitioner and even the layman ignorant of the technical phrases of the medical man will often speak of "fighting a sickness."

The microbic origin of all diseases has revolutionized our conceptions of them, their means of infections and method of resistance by the patient, also their prevention and treatment through vaccines and antitoxins. As far back as 1798 the great observer Jenner noticed the fact that cows were susceptible to a certain disease called vaccinia, peculiar to themselves and marked by a pustular formation. Persons who were infected with the vaccine germ obtained from the pustule were henceforth immune to the contraction of small-pox.

The study of artificial immunity received then its first great impetus. Most of us know now what vaccination is and of its beneficent effects. But artificial immunity is so closely associated with personal or individual immunity that we can not dissociate the two. Thus we know that the organism itself has within itself certain great powers of defence which are aroused or drafted into service when confronted by an invading army of foes in the nature of germs and their poisons. This occurs without any modification or help from any outside forces or agents and comes totally from within. An organism which is thus able to withstand and vanquish an invading army of microbes is naturally immune, while an organism that is vanquished in this battle with the microbes is spoken of as having a small resistance or being predisposed. In introducing any foreign agent of an organic or vital nature (exclusive of drugs) to combat the invading host we do not rely entirely on this outside agent but simply hope for it to start up or stimulate the defensive forces of the organism itself.

How does the organism protect itself against the attack of the foe? Prof. Ehrlich the greatest scientist and investigator in the world along these lines elaborated a most ingenious theory which to this day has held its ground through experimental verification and practical application. Before considering the Side-Chain Theory of Ehrlich it would be well to bear in mind that microbes do not exert their pernicious influence per se but act through the elaboration of certain poisonous or toxic principles which invade the circulation and have a predilection for certain viscera. It is the toxin then that injures the organism and not the microbe itself. The nature of the toxin is not clearly understood and its chemical composition

not known. Its existence as an entity independent of the microbe and its elaboration by the latter fully established.

Thus the Typhoid bacillus chooses for its habitat the gastrointestinal tract and from there its toxins enter the general circulation and choose the heart and kidneys for its onslaughts. While therefore intestinal antiseptics may destroy the *Bacillus Typhosus* in the small intestine it can not reach the toxins elaborated by them and the disease runs its usual course of 4-5 weeks, the physician guarding the heart and the kidneys. It is therefore the toxin that produces its deleterious effect upon the organism. These toxins are freely soluble in the culture media in which the bacteria are grown so that if a bouillon growth of typhoid bacilli is filtered through filter paper the filtrate will contain the toxins, and when injected into an organism will prove extremely toxic. Moreover, these toxins have the property of stimulating in an organism the formation of neutralizing bodies that will counteract their pernicious activities and these are known as Anti-Toxins.

Now the Ehrlich Side-Chain Theory explains how the toxins attach themselves to the organic cells, and the principles that an organism elaborates to combine with these toxins and neutralize them. A conception of this theory clarifies the process of individual and artificial immunity. It is the serum of an organism that contains these antitoxic bodies and these co-called antitoxins are specific for each disease and immunize the organism against a specific infection. Thus diphtheria anti-toxin will protect the organism against Diphtheria, while Tetanus Antitoxin will protect it against Tetanus.

The following is the method of producing Diphtheria Anti-Toxin for preventive and curative purposes. A culture of Diphtheria Bacilli is grown in a sterilized culture medium such as Bouillon. After about 48 hours a very vigorous growth of virulent bacilli is obtained. The bacilli then settle to the bottom, and the toxin is obtained free from the bacilli by filtering through a sterilized filter paper after pouring off the supernatant fluid. It is then stored in sterile bottles in a cool place until needed. Vigorous horses that are free from any disease are then immunized with these toxins in order to get them to produce an Anti-Toxin. The horses are injected with sufficient Toxin to kill 5,000 guinea pigs each of 250 grams weight. After a few days a second and larger dose is administered. The doses are constantly increased at intervals of from 5 to 8 days till at the end of two months twenty times the original dose is given and the horses meanwhile immunized or stimulated to produce an Anti-Toxin. The next object is to collect the anti-toxic bodies which the horses have produced in order to overcome the infection. The blood is then withdrawn from the jugular vein by means of a sharp pointed canula which is plunged through the thin vein wall. The blood is collected into a flask and allowed to clot. The serum is drawn off after four days and stored in a refrigerator. It is then placed in vials.

The theory propounded by Ehrlich explaining the action of this serum is as follows: Each cell in a living organism throws out for

the purpose of nutrition certain processes from its side which are very much like the pseudopods of the amoeba. Ordinarily these processes serve the purpose of attracting and attaching to themselves particles of nutrient matter which enter into its composition. These projections or "Side Chains" of the cells are known technically as receptors. The toxin may be also considered as a body with two extremities or groups, one of which attaches itself to the receptor of the cell and is known as the haptophore group, and the other the toxophore group is the carrier of the poison. A poison molecule might lose the poison or toxophore group and still be able to combine by means of the haptophore group with the receptor of the cell. This modified poison is called a toxoid. In order that a poison may exert its poisonous action it is necessary that the haptophore group form a very stable union with the receptor of the cell, in other words it must combine like a lock with a key. These side chains of the cells or receptors ordinarily used for nutrition and assimilation, are according to Ehrlich the antitoxins which the cell thrusts into the circulation in order to protect itself against an invading army of toxins. The toxin seems to act as a stimulus for the production of these side chains. A good many of them combine or satisfy the haptophore group of the toxin molecule while those which are formed in excess are thrown off the cells and circulate freely in the blood, and these form the anti-toxin. It is this excess of anti-toxins which severed from their connection with the cell body and circulating freely in the blood now exert their anti-toxic and protective function by combining with the freely circulating toxins and thus prevent their combination with the cell body proper. When in an organism of very strong resistance to the toxins of a certain disease these anti-toxins are far in excess, they may be collected from the serum as in the case of the horse when making diphtheria anti-toxin and injecting them into another organism of a greater susceptibility to that certain disease where they will exert the same immunizing or protective influence and protect the new organism against the pernicious activity of the toxins. It is really on this assumption that the practice of immunizing one organism against a certain disease by injecting it with the anti-toxins obtained from another body where they have been produced in excess.

According then to Ehrlich the production of Anti-bodies or Anti-toxins proceeds in three well defined stages.

- 1). The binding of the haptophore group to the receptor.
- 2). Increased production of receptors following this binding.
- 3). The thrusting off of these increased receptors into the blood.

Prof. Wasserman proved this to be true experimentally as follows: The tetanus toxin it is known has a special affinity for the cells of the central nervous system. He therefore mixed some tetanus toxin with macerated cells of the central nervous system in a glass. The haptophore group of the tetanus toxin combined with the receptors of the neurons and held the toxophore group in strong union, neutralizing it. If then this mixture containing a very virulent poison was injected into the nervous system of an animal it proved innocuous

because the toxin could not then combine with the cells of the nervous system. If on the other hand the tetanus toxin was mixed with the cells of any other organ such as the heart or liver and then injected into an animal it succumbed because there was no binding of the toxin by cells having no affinity for it, the toxin being free, its haptophore group therefore combined with the receptors of the nerve cells of the animal and the animal died.

The second and third law of Ehrlich, that of the production of receptors and their throwing off into the circulation, he proved as follows: He employed a tetanus poison which he had kept for about eight years and which was originally very toxic. He injected this into a guinea pig and produced no tetanus, owing to the fact that it had lost its virility through time, light and oxidation. He then examined the blood for anti-toxin found no trace of it. He reasoned from this that the cells had produced just enough receptors to bind the haptophore group of the toxin which were not thrust off but remained in the cell and were called sessile. This would prove the second point about the production of receptors by the cells. He proved this as follows: He ascertained from a fresh culture of a virile Tetanus toxin the exact amount which would prove fatal to a guinea pig. He then injected the same amount into the first guinea pig that had been injected with the toxin that had been kept for eight years and it did not kill the animal. This then proved that there must have been an increased formation of receptors which were formed and thrust off into the circulation and combining with the virile toxin prevented it from attacking the cells and killing the animal.

It has moreover been shown that it is possible to immunize animals not only against toxins, but against ferments, poisonous proteids, etc. These bodies must therefore also contain haptophore groups and are called collectively antigens or haptins.

A few hints in Extraction

By Dr. M. Friedland

Part of Paper on "The Extraction of Teeth, under Nitrous Oxide and Oxygen"
read before the Harlem Dental Society, April meeting, 1912.

1 Never remove the mouth prop until the patient is fully out of the influence of the anaesthetic, as it is a physical impossibility to swallow while prop is in firm position.

2 If upper and lower teeth are to be extracted, start from the lower jaw first so that the flow of blood from the upper jaw will not interfere with your extraction.

3 At the time you extract an abscessed tooth and when the so called "gumboil" is developed, open same while extracting the tooth, as the absorption of the smallest quantity of toxins, may cause constitutional disturbances. I use for this purpose the fine manicuring scissors as you will find it is to better advantage than a lance.

4 Examine every socket carefully after the extraction, remove loose hanging gum and debris, also when the gum has been cut through, in the front teeth especially, pack same loosely with gauze so as to have both edges in contact and healing will be quicker.

5 While extracting a tooth or root with pericementitis, use every effort to have the roots out, as an abscess of a severer character will follow due to the additional irritation, and patient is always under the impression that your attempt to extract is the cause of the abscess and not the infection of the offending roots.

6 If an apical part of a root is broken off it is useless to use forceps, but instead drill same out with a bur.

7 Elevators are to be preferred against forceps in the extraction of deep seated decayed roots as with these instruments you will cause less injury to the gum and alveolar ridge.

8 While extracting the 6 year lower molars, in children at the age between 7 and 9, be careful not to apply too much force on the lower jaw, as the temporary canine is in position, and the permanent canine and the two bicuspid are in the process of development so that the jaw at this particular part is very thin, and is easily fractured.

9 In the extraction of the 1st and 2nd lower bicuspid when compelled to go over the alveolar process bear in mind that the mental foramen through which the inferior dental artery and nerves pass is very close between these two teeth.

10 Be always prepared for an emergency, have a tongue forceps, powerful stimulants such as—Nitr. of Glycerin, Strichnine 1/50 of a gr. Arom. Spirt. of Ammonia, and brandy.

11 Hemorrhages are another source of trouble to the Dental Surgeon. I will give you here what you may call a specific:- Take *one ounce of Trichloroacetic acid, one ounce of Menthol*, -they are both in crystal form and just add a little *Creosote* to dissolve the above named crystals and you will have one of the best and quick acting *styptics* you could desire. Dip your gauze in it and pack the socket. It is one of the strongest blood coagulators I have ever seen. The same preparation can be used in sockets, after the extraction, to stop pain.

I have left packings in sockets for about 6 or 7 days and to my surprise I have found instead of a burned base fine healthy granulated tissue.

I cannot recommend too highly Dr. Buckley's *Euroform Paste*, which consists of even parts *Europhen* and *Orthoform*, to which liquid *Petrolatum* is added so as to form a paste and if same is applied to painful sockets after the extraction it certainly relieves the pain.

The Dental Parlor

BY DR. L. E. EVSLIN.

Can we rid ourselves of the dental parlor? My answer is in the negative, and for the following reasons:

An ulcer due to the general state of the blood can never be treated radically unless the blood itself is purified, and the system in general is brought to a normal state of health. The dental parlor, quack dentistry, quack medicine and quackery in every other profession are unhealthy ulcers of the present society, and are due to the abnormal economic relations of this society. Quackery and exploitation in every other form is a natural outcome of the present state of society, and is, as an ulcer, a pathological state, and as such, cannot be cured by palliatives in the form of laws prohibiting this or that.

Let us suppose that a law is passed prohibiting the advertising of unjustified claims or promises. How can we prove, in a Court of Law, that the claim, for instance, of *painless dentistry*, was not meant dentistry done under general or local anæsthesia? How can we prove that the claim of the *alveolar process* method was not meant bridge work in a general sense of the term, etc.? Personal gain being the principal incentive and the great locomotive of our present system, people will always find a way to gain their ends in spite of the law, and especially so since the laws, even the best, are still laws maintaining and supporting the present regime which means the exploitation of one man by another.

We will suppose that a law is passed prohibiting any professional associations of more than two men. Will dental parlors en masse and en miniature do away with quackery? Is it not an open secret that the greatest harm, the worst work and the greatest amount of exploitation is done by the great number of private dentists practicing among the poor? As a matter of fact, nearly every dentist's office in the poorer districts represents a dental parlor with all its beautiful attributes. This is not because all these men are so particularly unscrupulous and bad, but, on the contrary, most of these men are very good men, but it is because of the beautiful conditions of our life. Every man, even the very best, is turned into a thief and exploiter. The poor are forced to look for cheap work and cheap professional services. The man that does the cheapest work is the one successful. On the other hand, cheap work, in the great majority of cases, means bad work, for the man has to do great masses of it in order to obtain a livelihood, and even with the best intentions he cannot offer to do justice either to his work or to his patients. He simply offers the equivalent, if he is honest, and that is bad work, considering the low prices, and so even the finest man is turned quickly enough into a quack, working under the present horrible conditions of society.

A dental parlor is certainly appalling, but between the two wrongs, I certainly would prefer a well organized dental parlor, to a dirty hole, as most of the private offices spoken of above represent.

That the cheapest work is the poorest work is almost a maxim, and by proper education of the public, some, even of the poor patients, would look for superior dentistry, but is not exploitation also there? For we must remember that the desire for personal gain becomes as a necessity with a great majority of men under the present conditions. How can we correct this evil?

Admitting a law is passed for the State to provide a number of standing Examining Committees with the jurisdiction of passing on each and every operation and of imposing a penalty, say with the loss of the license for the crime, of say badly filling root canals in three different cases, etc. Consider the injustice in connection with such legislation. How often can an expert say whether a root canal was filled properly even then, when an X-ray examination reveals the fact that the canal is well filled? Suppose the canal was not sterile before filling it would the fact that it is filled well mechanically mean that the operation was well performed? On the other hand, suppose pericementitis set up subsequent to the filling of the canal, would that mean that the practitioner has not taken all the surgical precautions and care before filling it? How could one pronounce a verdict in this most important operation?

Another example: Many dentists prefer to extract teeth or roots that could be saved and made useful by proper treatment. Suppose the patient complains, how can one establish the fact whether the tooth or root could be saved, after it is extracted? Of course, in many operations performed, expert testimony would be and could be of great value in protecting the patients' interest, but there are a number of operations, and the most important ones, by the way, that could not be judged with justice for both patient and practitioner, unless it is a case of gross neglect and mal-practice. The encouragement of cleansing a root canal thoroughly would certainly be great, if one was liable to lose his license to practise for breaking a broach, say in three different cases.

It is easy enough to talk about ethics or ethical practise for the one that has such a practise, or for the one that has the means of establishing such a practise, but how about the great majority of dentists, whether in the form of a dental parlor, à la Fifth Avenue, or à la Bowery?

Quackery will remain as long as the economic conditions will remain unchanged. Foul air must breed disease.

Practical Cases at the Operating Chair

By Dr. M. S. Calman

Case 1. Woman, age 38, suffered from "locked-jaw," crackling sound at left maxillary joint, no pain. Was treated at a dispensary for three weeks, no improvement.

On examination, exposures of the pulps of the second lower left bicuspid and lower left first molar were found. The pulps were removed, roots filled with Velvo preparation, gutta percha points inserted, and amalgam fillings made. Three days later the "locked jaw" condition disappeared.

Case 2. Woman, age 58, suffered from "locked-jaw," crackling sound at left maxillary joint, intermittent pain in region of left ear and left lower part of face. Family physician prescribed a salve, no improvement.

On examination, a partly decayed second lower left bicuspid root - the jaw otherwise being edentulous - was found. The root was extracted, and shortly after conditions returned to normal.

I believe in both cases pathogenic bacteria entered the circulation through the exposed capillaries of the pulps, and travelling up to the synovial membranes of the maxillary joint interfered with their secretion of the synovial fluid, thus rendering the joint dry.

Case 3. Woman, age 42, complained of pulpitis in second upper left molar. In opening up the tooth, one big fleshy pulp was removed all three root-canals seemed to have been fused into one big canal. A nerve broach was inserted into the canal, full length - up to the handle of the broach holder - penetrating into the maxillary sinus, the patient not complaining. The root was treated and filled with Velvo preparation and several gutta-percha points were inserted. The molar served as an abutment for a four-piece bridge. Eight months ago, no complaints.

CHAPTER ACTIVITIES

There will be no meeting on Friday, May 3rd, due to the approaching final exams.

The next regular meeting will take place on Friday, June 7th at 8 p. m. An interesting program has been arranged for that evening. The program will be announced in the June issue of the Progressive Dentist.

...The Progressive Dentist...

PUBLISHED MONTHLY BY THE
DENTISTS' STUDY CHAPTER, I. S. S.

Subscription price 25 cents yearly.

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*All business communications should
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26 E. 106th Street, New York.*

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EDITORIAL DEPARTMENT

A great deal has been written on the subject of dental ethics. Lectures have been delivered, editors filled the columns of their journals with articles dealing with the subject and dental societies have devised various rules to keep up the "ethics" of the profession. But lo, in spite of all those worthy efforts it is going "to the dogs" so to speak.

The lecturers, the editors and the high officials of the dental societies are at a loss to understand the cause of this retrogression and yet the explanation is very simple.

Ethics or ethical codes are not a matter of brain or heart but of plain economics. By the light of this simple truth we can explain and understand the cause of the failure of the efforts to raise the ethical standard of the dental profession.

Whether a law of conduct is ethical or not depends, a great deal, on the character of the predominant economic system of a given period. Every moral law is the result of a peculiar social need and of the peculiar thought of the society which created it. To illustrate: The southern slaves were a source of income to the slave-holders. Their ownership was, therefore, considered ethically just. Any attempt to deprive them of this ownership was resented and considered unethical, immoral and unjust.

Every young graduate cherishes certain ethical concepts which he hopes, nay resolves, to live up to. When he begins to practice his brain is full of those concepts but, to our great sorrow be it said, his pockets are full of emptiness. No sooner does he hang out his beloved ethical sign and before it gets even a chance to become soiled, not to say weatherbeaten, failure stares him in the face. Why?

To answer this question we must point out, as we have done on previous occasions, that the majority of dentists draw their clientele from the working-class and small business men. These people, after

meeting the expenditures incidental to daily life, have a very small amount left out of which to pay for medical or dental services. Our new practitioner, if he is to exist at all, must violate the first rule of his code of ethics and instead of charging for his services according to the time spent he must ask only for cost of material plus a little for professional services.

Some people flock to the office that displays the biggest sign, others are not satisfied that one is a bona fide dentist unless he flaunts the image of a tooth on that sign. Of course it might be argued that these people are ignorant. But it must be remembered that the argument as such will not help in the least towards abolishing big signs.

The force of circumstances compel the newly pledged practitioner who started out with a 2 x 4 in. sign to change it to a 2 x 4 ft. sign. His ethical conscience receives a rude shock and his pet ethical concepts are shattered attesting to the truth of the uncouth but true saying that "you cannot pay rent with ethics." The law of self-preservation, not being much of an ethical stickler, holds good in this as in a good many other cases where the existence of the individual is involved.

The dental societies are the self-appointed guardians of the ethics of the profession. They exclude from membership the dentists who hang out big signs or who cannot conform to the rules set up by their more fortunate brethren, and thus think the problem has been solved. This kind of action is very much similar to that of the ostrich who by hiding his head in the sand believes that he also hides from view the rest of his body.

If the standard of the dental profession is to be raised, if it is desirable that all dentists should be ethical practitioners then the crying need is co-operation and mutual understanding amongst the entire body of our fellow professionalists irrespective of whether they display big or small signs.

Co-Operation in the Desert

By W. J. McGee

[Some opponents of Socialism take special delight in repeating the time-worn and silly argument that you must "first change human nature" before we can have Socialism or that "individuality will be destroyed under Socialism," etc. Eventually, human nature is very much similar to the natural characteristics manifested by the animals and plants inhabiting this globe. Environment is the strongest factor in moulding these characteristics. Scientific investigators have shown that the vital energies of plants and animals are mutually directed against the hostile environment in which they live, and that one of the results of such co-operation is not only the development of strong individuality but the survival of species which under competitive conditions would have become distinct.

Many are the lessons of co-operation which we can take from the subhuman organisms. One such lesson is contained in the quotation which we give below. It is taken from a volume entitled

"Source Book of Social Origins," it is remarkable for its excellent description of co-operation as found among the animals and plants of Papagueria, and it answers the argument that Socialism (another term for co-operation) will destroy individuality.—*Editor.*]

A mesquite springs up on the plain; within two or three years the birds resting in its branches drop the seeds of cacti, some of which, like vines, are unable to stand alone; and the cactus and the mesquite combine their armature of thorns for mutual protection. The wind-blown grass seeds lodge about the roots, and grasses grow and seed beneath the sheltering branches; and next small mammals seek the same protection and dig their holes among the roots giving channels for the water of the ensuing rain and fertilizing the spot with ejectamenta. Meantime the annual and semi-annual plants which maintain a precarious existence in the desert take root in the sheltered and fertilized soil beneath the growing cactus and mesquite, and in season it becomes a miniature garden of foliage and bloomage. Then certain ants come for the seeds, certain flies and wasps for the nectar, and certain birds to nest in the branches. In this way a community is developed in which each contributes to the general welfare. So advantageous is the communal arrangement that few organisms of the drier portions of Papagueria pursue independent careers; the vast plains are dotted with communities or colonies from a few rods to some furlongs apart, while the intermediate stretches are practically lifeless; and the very soil is molded into a succession of hillocks with bare glades between, which persist even after the extermination of the colonies through climatal change or through human intervention. Thus do a large part of the plants and animals of the desert dwell together in harmony and mutual helpfulness; for their energies are directed not so much against one another as against the rigorous environmental conditions growing out of dearth of water.

The communality does not involve loss of individuality, which prevails throughout Papagueria—indeed the plants and animals are characterized by an individuality greater than that displayed in regions in which perpetuity of the species depends less closely on the persistence of individuals. By reason of this individuality there is a certain enmity between the animals and vegetal colonists. The small kinds devour the seeds of the cactus and the squirrels nibble the beans of the mesquite, yet not all of the seeds are eaten, else a succeeding generation of birds and squirrels would starve; the spiders suck the blood of the flies and the wasps paralyze the spiders to serve as food for their young, yet not all of the flies and spiders are slain, else their enemies would famish; the hawks and eagles rend the small birds and squirrels, yet not all of the peaceful creatures are rent, else the birds of prey would perish; deer and antelope and, since the coming of white men, burros and kine crop the grass and browse on the tender twigs, yet not all the grass and young shoots are consumed, else the herbivores would suffer and die. In some respects the enmity of the colonists is more bitter than that of antagonistic species in humid lands; yet

it is adjusted and developed into a marvelous solidarity under which the sum of possible vitality is increased apparently to a maximum; singly or collectively the colonies support more plants than they would be able to support without the aid of their animal associates in the distribution of germs and in fertilization; they support more insects than could live with a sparser flora; they support more herbivores than could be kept on a flora not fertilized by insects; collectively the colonies support a carnivorous fauna which could not exist if either the herbivorous things or the plants on which they live were destroyed. If the vitality of the desert were limited to any one type the sum would be reduced nearly or quite to nothingness, for few of the plants and none of the animals are independent of their communal associates. The solidarity of life in the desert is far-reaching and rises above the antagonism of individuals and species, for its strength is directed against the hard inorganic environment.

**Who is a Socialist?
It is a Man!**

BY ELLA WHEELER WILCOX.

WHO tries to formulate or aid a plan
To better earth's condition? It is he
Who having ears to hear and eyes to see
Is neither deaf nor blind when might roughshod
Treads down the privileges and rights which God
Means for all men, the privilege to toil,
To breathe pure air, to till the fertile soil.
The right to live, to love, to woo, to wed,
And earn for hungry mouths their meed of bread.
The Socialist is he who claims no more
Than his own share from generous nature's store,
But that he asks and asks, too, that no other
Shall claim the share of any weaker brother,
And brand him beggar in his own domain
To glut a mad inordinate lust for gain.
The Socialist is one who holds the best
Of all God's gifts is toil—the second rest.
He asks that all men learn the sweets of labor
And that no idler fatten on his neighbor.
That all men be allowed their share of leisure,
Nor thousands slave that one may seek his pleasure.
Who on the Golden Rule shall dare insist,
Behold in him the modern Socialist.

—*N. Y. Evening Journal.*

Democracy and the College

BY JOHN TEMPLE GRAVES, JR.

The American college is a strangely complex and contradictory institution. In one conception it is a glorious democracy, in another it is a stronghold of aristocracy.

The ideal concept of a college is democratic and socialistic. Here every man stands on his own feet and his own merits. Here he is free—free to think, free to speak and act—within the bounds of the common good. There is equal opportunity for all, all are brothers in the splendid fraternity of a common youth and a common ambition. This is democracy. To all outward appearances the college man is untouched by the sordid money incentive that must surely grip him after graduation. His sole incentive in college is honor and achievement for himself and credit and glory for his alma mater. His is a life of freedom and equality, unexploiting and unexploited. He is judged impartially and awarded the full value of his work. He expands naturally and intelligently. This is ideal democracy; this is Socialism.

Such is the theory of a college. These are the principles upon which educational institutions are founded. These are, in form, the ideal conditions under which a college man works and from which he graduates into a splendid, public spirited citizenship.

Into this beautiful Utopia has gnawed the spirit of a self centered money mad civilization. The colleges have become an expression of the world outside. Not visibly so. The forms, the appearances remain the same. In form of government the colleges are still hot houses of democracy. There is no law against democracy, against freedom. But another force, just as compelling, just as potent as law, is smothering freedom and democracy. This is the force of *influence*. Environment and atmosphere are more operative on the individual than a form of government. An environment of clubs and fraternities makes of most colleges a petty, graded, aristocracy. The college man is influenced (at a time of life when he is most easily influenced) to become a snob, looking up to those in better fraternities, looking down on those in lower ranking ones, and inwardly despising those "barbarians" who can belong to none at all. The shy, silent, unsocial men, who by these very qualities fail to make a fraternity, withdraw more and more into themselves and are influenced to become more shy, more silent, more unsocial. Many men, determined to make a society at any cost, are influenced to become abject bootlickers and self centered politicians. For fraternities mean everything in a social and political way and he who fails of admission to their sacred cloisters is indeed a "barbarian" and an outcast.

But in the last analysis college life is chiefly a workshop of storage and preparation, and social or political preferment are temporary and subsidiary advantages. The real and vital criticism of our educational institutions is that the student's mental conclusions are shaped and influenced (and that usually in the wrong direction) by his professors and his text books. In economics, in philosophy, in

jurisprudence, and science there are certain facts which are clearcut and indisputable. The conclusions to be drawn from these facts, however, are in doubt and constitute the sociological and ethical and scientific problems of to-day. In the case of every one of these facts there are at least two interpretations—the capitalistic and the socialistic. Instead of impartially presenting these two conflicting interpretations, most of our capitalist endowed, capitalist ruled colleges influence the student into the delusion that there is but one conclusion to be drawn from the facts given, and that the capitalistic. To them there are no modern problems, no other interpretation to be gathered from the facts. They influence a deadly patriotism, to love and idealize one's country as it is, to be patriotically blind to its faults, patriotically inert in checking evils that creep in, ever crying that the state can do no wrong. They worship a Billiken, God of things as they are, and they toil ceaselessly to prove why things are, and should be, as they are, rather than to find how things should be and must be for the uplift of humanity.

The colleges are ripe for the new order. They need the inspiration and influence of the Socialist philosophy. A new spirit has crept over the earth, the spirit of democracy, of freedom, justice and brotherly love. It is time the American colleges seize this spirit, cease to be continually catching up, and become the type and forerunners of the age. It is time the average became the ideal college. Let us have economics and science and jurisprudence and philosophy taught without bias, with honest admission of the problems they bring to light and fearless investigation of all serious solutions offered to those problems. Let the red blooded radicalism and idealism of youth be given a fair show. Let the college be the fosterer of individualism and freedom of conviction and honesty of thought rather than a place of one deadly atmosphere where all mental attitudes and processes herd together and seek one bromide path.

May and Might

BY HARRY ROGOFF.

They appeal to me both as nouns and verbs these two short pregnant terms, may and might. In the one case they signify potentiality, liberty and power in action; in the other, they designate the season and the force of creation and victory.

There is the holy gospel of May, of freedom to act, of license to enjoy, of permission to expand, in the beautiful spring month of May. There is the promise of Might, of possibilities in life, of achievement, in the happy possession of Might.

May and Might! They are uncommon moods, difficult to master, hard to acquire. Long, wearisome months of frost, wind and rain torture and torment us before the soothing salutary palm of May reaches out from underneath the thick folds of time. Long, ridiculous years of helplessness and stupidity maim and distort our being before the consciousness of Might comes to our rescue.

Have May and Might ever been realized in your life? Have

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you passed at least a brief space, a breath of time with Might in your soul and body, with May in your blood and flesh? Has a dauntless impulse to act, to enjoy, to live ever taken full possession of your being, and have you succeeded in giving full, satiating expression to this craving? Has the thirst of May ever parched your soul and consumed your body? Have you quenched that thirst at the deep well of Spring to the fulness of intoxication, of disgust?

I don't suppose you did. You have not the chance, neither do you possess the faculties for it. Pretty nearly all of us come into life sick, with a weakness drawn from the womb which begot us. We are born abnormal, defective either one way or the other, either in impulse or energy.

And if you are one of the very limited few, if Nature has by some freak or mistake created you normal, with a body and soul that are endowed with both May and Might, I suppose society knew how to guard you. Amongst invalids the healthy is considered dangerous. In an asylum of lunatics the mentally sound is regarded with suspicion. Your May spirit must have been denounced as sinful and vicious; your Might as license and criminal. You were prohibited, forbidden, battered and clogged with laws, courts, conventions and traditions until you cowered into submission.

The true value of May and Might in life have not yet been appreciated by man. These terms were abused and their meaning misconstrued. Might was taken to be any antagonism of right—a quality of the brute and the savage. The spirit of May was denounced as that of destructive rebellion and dangerous insurrection.

I pity you, I pity myself for having been born in this age of conscious weakness and helplessness. I am sure our race is developing to a true comprehension of those two wonderful words. I am sure that May time is dawning upon our civilization, that Might is advancing in full swelling waves to regenerate the spirit of our individual. But alas! long before the dawn will sweep away the rising mists, long before the waves will break through the thick walls of stupid resistance, our lives will be rotting in the grave and our souls will be roaming in the desolate regions of Nirvana.

I pity you and I pity myself. I seek not for words of consolation, if you will offer them to me I shall reject them with contempt.

I know all you can tell me. I too understood the soft, delicious voices of nature, the warm emotions of the poets, the invigorating words of the prophets. I know them, I understand them, I feel them, but they only serve to irritate and pain my soul. Their illusions of sweetness delighted refreshment are for me mingled with the corroding poison of reality.

THE PROGRESSIVE DENTIST

Let us be sincere to ourselves. Let us admit the unhappy futility of our existence. Let us record it in our lives and inscribe it on our tombstones.

May and Might—the two main springs of happiness in life are choked up for us by mountains of dirt and stones which a long winter's frost flung into it.

This is not pessimism. These are not words of despair or discouragement. The past is dead to reproaches, the present is but a fleeting moment, and the future is sure to be free from the clouded conditions that give foundation for these sentiments.

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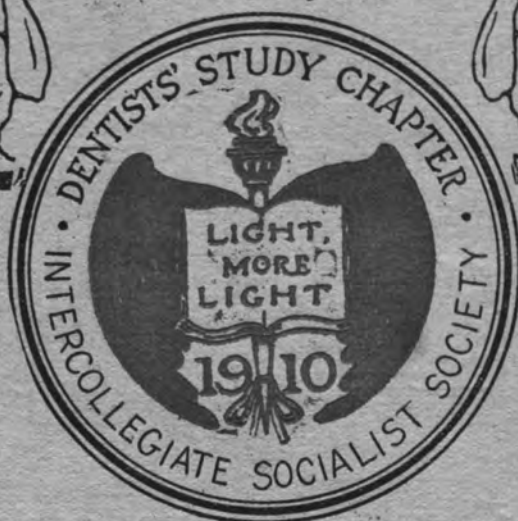
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Published by the



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Vol. I. June 1912. No. 6

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Vol. I.

June, 1912

No. 6

The
PROGRESSIVE DENTIST

PUBLISHED MONTHLY BY THE
DENTISTS' STUDY CHAPTER, I. S. S.

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PUBLICATION OFFICE

26 EAST 106TH STREET

NEW YORK CITY

Subscription 50 Cents a Year

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GRADUATES N. Y. C. D. 1912. MEMBERS DENTISTS' STUDY CHAPTER, I. S. S.

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The Progressive Dentist

Vol. I

June 1912.

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The M. D., The Dentist, and the Alveolar Abscess

By DR. MAURICE GREEN.

Many times in the course of my practice, I have had cases referred to me after the medical practitioner had either incised the face or the mucous membrane of the buccal cavity, with the statement that altho the pus had been evacuated by means of the incision, the abscess would not heal.

This leads me to conclude that the average medical practitioner in dealing with a true alveolar abscess (whether he diagnosis it as such or not) is ignorant of its etiology and therefore cannot be expected to effect a cure.

In the first place to be fully conversant with an abscess of this character it is essential to fully understand its etiology.

Ninety-nine and nine-tenths per cent. of "swollen jaws" (if I may call them so), whether pointing on the face or the gum, are of dental origin, and due either to devitalized teeth containing putrescent pulps, to non-treatment of carious teeth, or from the same class of teeth which have been improperly treated through either carelessness on the dentist's part, or his inability to reach inaccessible root canals.

In some cases when the face or jaw swells, the patient presents himself to his physician, who makes an examination, detects fluctuation and immediately incises to evacuate the pus (without considering the cause and remove the same) thinking only thereby to relieve the patient at once and that healing will ensue.

This is a serious mistake. Healing will not take place *unless* the matter is treated from its origin and this can only be done by a dentist who has a thoro understanding of the case and has the proper instruments at his command. True alveolar abscesses, as I have stated, occur only in teeth containing devitalized pulps, which become putrefied and the products of putrefaction **set up an irritation** beyond the apex or apices of the tooth and produce an inflammation culminating in pus within the maxillæ. In the beginning the pus burrows thro the hard tissues until it reaches the soft tissues when a swelling ensues, which can be incised for evacuation of the pus and alleviation of the patient for the time being.

Often the M.D. will incise the cheek when the abscess tends to point in that direction.

This is a serious mistake and I should consider it malpractice were a dentist to do so, unless he has first tried every method at his command without any success.

The proper method of treatment for alveolar abscesses, is to first decide whether the tooth causing the trouble can be saved or not.

If the tooth is to be condemned, extract at once. There is *no* case of this kind, no matter in what condition the face may be, that the tooth ought not *immediately* be extracted.

Any subsequent trouble that may follow must *not* be attributed to the extraction, as such lesion will occur even if the tooth remained in situ, and in 99% of the cases and possibly more, the extraction will effect a cure, tho in some cases possibly a supplemental lancing will be found necessary.

Should the tooth be one that can be saved, it must be opened properly to its very apex or apices, cleansed of its putrescence and the pus which may be beneath it, evacuated through its canals, then by asepsis it must be sterilized and treated in the manner known to the dental surgeon and finally fill canals to apices with antiseptic canal fillings. During this time the alveolar abscess subsides and the tissues become normal.

Should the patient present with the abscess pointing on the cheek, I believe in extracting the offending member *at once*—painting the inflamed (cheek) area with three or four coats of collodion to give some support to the indurated area to prevent it from bursting and to incise within the buccal cavity until I get to the pus, provided the pus does not evacuate with the extraction.

By this method I have saved a number of cases from unsightly depressions and facial scars, so common to the older generation.

Should an external incision be absolutely necessary, I find that a needle puncture answers *all* purposes. It allows the pus to drain sufficiently and leaves no unsightly scar, always provided that the origin of the lesion be properly treated.

With these general remarks as to etiology and treatment, I wish to state that a simple way to ascertain if an abscessed condition is of dental origin, is to tap the crowns of the teeth in that region with any light instrument and usually great tenderness will be found around one or more of the offending members. If so, the physician should refer such patients to the dentist, and he in turn will refer his medical or surgical cases to the physician.

Now it is essential to briefly refer to the anatomy of the teeth to give you a thorough idea why an abscess occurs.

This can be better done by charts. We have the dense tooth-structure surrounding soft pulp which enters the maxilla and connects with its larger nerve endings.

The pulp decays (as I have said), the products of putrefaction cannot escape through the crown, therefore escape through the apex setting up an irritation within the maxilla, causing first intense pain, sensitive tooth to touch. After working its way through the bone, inflammation of soft parts ensues, pus forms and finally a bursting of the abscess, if allowed to go on, and finally relief but not a cure.

You can readily see that if the tooth is to be saved a dentist only can do that, because he has the knowledge how to handle the case.

If the tooth cannot be saved, as I have said, extraction will in 99% of the cases prevent lancing, so why lance first. Place the patient in proper hands and they will be grateful to you for the

proper treatment they will thus receive.

I hope that I have made some points clear, and altho this paper is not in the least theoretic, I wish it to be considered from a clinical aspect of such cases and to assist you in the diagnosis of this very common ailment, and advise you of proper treatment such cases ought to receive.

The Dimelow Interchangeable Facing

By ERNEST L. CARR, D.D.S.

It is seldom that any new idea brings both ethical and mechanical advancement to the dentist to so great an extent as does the interchangeable facing.

It appeals most strongly to the particular and conscientious practitioner who is desirous of combining with his best efforts the most advanced methods and materials.

The latest thing in interchangeable facings is the Dimelow, on which I shall dwell for a few minutes. Briefly, the Dimelow facing allows the dentist to protect his patients against those embarrassing periods during which they must meet their friends with an unsightly mouth, their bridge being removed for a few days for repairs.

Let the dentist supply his patients with duplicates of the facing on the bridge or Richmond crown, and should a break occur anywhere, at home or when traveling, any dentist can make the repair quickly and without removing the bridge.

From a sanitary view it is ideal. After cementing the tooth in place there is no space between the tooth and its backing for the secretions of the mouth to accumulate, and should the cement eventually wash out, the tooth itself will at once give the alarm by loosening, when it be again cemented into place and the aseptic condition continued.

Mechanically, the Dimelow facing entirely solves the problem of bridge repairs. No bridge need be removed, a new Dimelow can be cemented into position in a few minutes. Recession of the gums after a recent extraction is also provided for.

On the original case a short tooth may have been indicated, and in some mouths afterwards a longer tooth may be required. With the Dimelow all backings are identical, so that the short tooth is removed and the longer one substituted. The many advantages of the Dimelow can be best appreciated by a personal investigation, a complete examination or demonstration quickly convincing the practitioner of its many merits.

Oral Hygiene Versus Economic Conditions

By L. E. EVSLIN, D. D. S.

The mountain gave birth to a mouse. Not that mice have not been seen before, but His Majesty, the King, noticed a mouse for the first time. Numbers of practitioners have preached and practiced oral hygiene since dentistry became a science. Some of them went so far as to take the initiative to write and advocate the importance of oral hygiene in the "Daily Press," taking this initiative at the risk of being considered unethical, but it required that His Majesty capital, always on the lookout for new issues, should at last smell the oral hygiene issue, hoping to find in it a good advertising medium, and hence, as if by magic, the war cry is oral hygiene. It carries all and everything before itself, truly as only His Majesty capital can carry. Some one said "Every system carries in its embryo the germ of its own destruction." The above is not only true to life, but also to social systems, social questions and social reforms.

Every reform and improvement that tends to bring a greater sum of happiness to our lives is always welcome. The question only arises, to how many will this or that improvement bring more happiness? Enlightenment and education, in connection with health especially, are very noble and desirable things, but will the knowledge of the thing be sufficient to improve it? Certainly not, when the thing principally depends on other causes, which causes remain unchanged. For instance, very few physicians fail to advise their patients the principles of general hygiene, namely, to bathe daily, to eat regularly and slowly, to eat wholesome food, to take physical exercise, and so on; and how many follow this advice? It will be found that in 90% of cases, this all important advice is not followed, not because of laxity or ignorance, but on account of the adverse conditions of life, or rather existence. The working girl may know well the importance of hygiene in general, or oral hygiene in particular, and yet be unable to enjoy the luxury of either. Good advice and knowledge are not all—economics are at the bottom of it, and unless a radical change takes place in the latter sense, all the philanthropic movements, improvements and progress in science will not benefit the masses at large to any perceptible degree. We are afraid, therefore, to predict that the oral hygiene movement will not prove to be as efficacious a reform as some enthusiasts hope, and as every one of us would like to see it, but we are running the risk of being considered chronic pessimists in view of the wonderful attainments already claimed by this movement.

We are told that school children's teeth are examined in some few places and reports made as to the percentage of bad teeth. It really was not necessary to go to so much trouble to obtain this valuable information. Dentists on the Bowery in New York, or on Halsted Street, in Chicago, for instance, could as well give this information. However, to examine children's teeth does not yet mean to treat them, and here again the dentists of the above mentioned localities could tell you a story or two. They could tell you, for

instance, that many a good six or twelve year molar had to be extracted for the poor child because it was not allowed to pass its examinations without a dentist's certificate to the effect that the child's teeth were O. K., and the sacrifice of these teeth was not due to the ill advice of the dentist or the ignorance of the parents—but always to miserable economics.

Now we may be accused of under-estimating the value of the endeavor to create by this movement municipal and otherwise public clinics for the poor children. Indeed, a very noble and trustworthy endeavor, if such a thing as taking care of all the poor children's teeth were possible in such clinics, but for those that know of the young and old that ought to be in hospitals and sanitariums instead of the shops and factories, for the cure and prevention of diseases, of far more importance both to the individuals as well as the community than the teeth. It is excusable to be skeptical on the efficiency of such public clinics.

As far as the profession is concerned, the importance of the oral hygiene movement for its enlightenment seems to me absurd. Oral hygiene is the a b c of dentistry, and I am indeed very sorry for the man who does not know it, but one thing is to know it, and another thing is to do it. Those that enjoy rich or even middle class practices have done and preached it always. As to the average dentist, and that is the dentist of the poor, all the preaching on oral hygiene will not improve him, because he has no time to bother about it, being very busy in the effort to gain his bread and butter.

The state is charged to educate every child. The state ought to be also obliged to feed, clothe and take care of the child's health, unless the parents can prove conclusively that they can pay for it themselves. If the profession really desires a reform whereby all the poor children can and will profit, let us demand that every school in the country should have a room fitted up as a dental office with a dentist in charge of it and the best work be performed obligatory in the child's mouth while at school, and that a final school examination should also include a perfect mouth as accredited by a Special Dental Committee created for this purpose.

Chapter Activities

A very important meeting of the Chapter will take place on Friday evening, June 7th, 1912, at 8 P. M. sharp, at 56 St. Marks Place (8th St.).

Dr. M. S. Calman will lecture on "Whither Are We Drifting?"

Very important business to transact.

The June meeting is the most important one of all the meetings held during the year, because at this meeting the working program for the coming season is mapped out.

All members are therefore urged to be present.

**A few Remarks Addressed to the Ethical Members of the
Profession who were Represented by
Drs. Ottolengui, Hyatt, Stevenson, Bloom, Chayes and others,
at a Meeting of the Kings County Dental Society,
on Thursday, May 16th 1912**

By DR. MAURICE WILLIAM.

Mr. Chairman and Fellow Members of the Dental Profession:

Before going any further, I want to congratulate Dr. Shapiro for having brought this meeting about; it is one of the most important meetings ever held by any dental society, indeed to my mind, it is no exaggeration to say that it marks an epoch in our profession. There is an old saying that "one half of the world doesn't know how the other half lives." We can most truthfully apply that saying to the state of affairs in our profession, and therein lies the crux of the whole problem.

There is a feeling here to-night that our big brothers who have always followed the straight and narrow path, have come to admonish us for our waywardness and for casting a slur upon the family name; in other words, they are here to spank us for our misbehavior. I assure you gentlemen, there is spanking to be done to-night, but the "shoe is on the other foot." For years, we have dreamt of just such an occasion as this taking place here to-night, and we would be lacking of the full appreciation of its importance if we did not take complete advantage of it. None will deny that there are great and serious problems within our profession to be solved. Possibly no further proof is necessary than that there are two camps of one profession represented here to-night. How comes it that there are two camps? And if in union there is strength and in division weakness, whose fault is it that we stand divided? Where does the responsibility lie? Let us briefly review the situation.

From the first day that dental surgery reached the dignity and standards of a profession, its safe keeping has been entrusted to the hands of the ethical practitioners. The future of the profession was entirely in their hands. If they have discharged their responsibility to the greatest possible advantage to society and the advancement of the profession then all honor to them, but, if they have shirked their full responsibility, and by criminal negligence permitted the fair name of our profession to be dragged in the mire, then words are utterly inadequate with which to visit upon them our severest condemnation. Now for the facts.

We have seen that those who had the safe keeping of the profession in their hands had a two-fold responsibility, one to society, one to the profession. Let us first see how they have discharged their duty to society.

There is not a man in this hall who will not readily subscribe to the statement that oral hygiene is absolutely essential in the maintenance of public health. In other words, the very basis of the health of the nation is in the hands of the dental profession. Modern dentistry is in a position to stand abreast with modern medicine and

surgery to combat the ills that human flesh is heir to. Is humanity getting the full benefits of modern dental surgery? No thinking man could answer that in the affirmative. A healing science should be a democracy—none should be barred from its advantages. But what spectacle have we presenting itself to view in the dental profession to-day? The so-called ethical division of the profession is an aristocracy, catering exclusively to the aristocracy of the laity, and so far as they are concerned the rest of the human family does not exist.

Listen, you, the recognized ethical section of the profession, taking advantage of the fact that dental surgery belongs to the healing professions, have demanded from the State that you be given the complete charge of the profession as you were best able to look after the peoples' interests in your particular branch of the healing art. As sub-division of labor is the order of the day, the nation took you at your word, and turned over to you the care of the Nation's mouth. What has been the result? You, the ethical practitioners of the dental profession, have completely betrayed your trust. Prove it, you say. Very well.

Statistics have it that but ten per cent. of the American people have been educated to the importance of dental treatment. If this be true, what a terrific indictment it is against you gentlemen of the ethical profession, the entrusted guardians of the mouth of the entire nation. How can you justify yourselves for your criminal neglect of 90 per cent. of the nation? If by some chance this 90 per cent. were to awaken tomorrow and realize, as you and I do, how great has been the penalty of ignorance and how knowledge has been kept from them by the only ones who were in possession of it, what would be their attitude towards us? They would hurl down upon you their wrath and stamp you as betrayers of your trust, aye, traitors to humanity. But wait a moment.

I have said that ten per cent. of the people have been educated to the importance of dental surgery. Does this mean that you gentlemen have done your duty at least to the extent of educating ten per cent. of the people? I regret to be compelled to inform you that you have not exerted yourselves even to that extent. Of this ten per cent., about two per cent. owe their education to you, about five per cent. have been what we call mal-educated by the dental parlors, and about three per cent., which I will, for the want of a better term, call semi-mal-educated by the practitioners of the stamp belonging to the Kings Co. Dental Society. The question naturally arises, "What was it that prompted you to be so solicitous of the welfare of that particular two per cent.?" The answer is found in the fact that it meant dollars and cents to you. That is why you concentrated upon this two per cent., and that is the extent of your ethics. These in brief, are the facts which go to prove how you have discharged your responsibility to society.

Now, what effect has all this had upon the profession? I have said that five per cent. of those who visit the dentist are preyed upon and maltreated in dental parlors. So far as the average patient

is concerned, you gentlemen are entirely eliminated from the dental profession. They do not know you, do not know of your existence, do not know of your ethics or standards of practice. In the average lay mind that is at all interested in dentistry, the status of the dental profession is entirely based upon the education that they obtain from the dental parlors. The advertising, the catch-penny methods, the night work,—all these things are to the lay mind the status of the professional standing of dentistry. The result is that the average patient has been educated by the dental parlors to believe that the best dentist is the one with the biggest signs and who makes the greatest amount of noise. This is the condition of things that a dental graduate finds when he is ready to embark upon his professional career. I ask you gentlemen, what do you advise him to do? On one hand, he finds you gentlemen having a monopoly of the better class practice (I say monopoly in the sense that wealth and social position are pre-requisites in order to be at all able to make a bid for the better class practice). Therefore, the average man, no matter what his ability, he is, for a good many years at least, unless he wishes to invite starvation, entirely excluded from your field. Your two per cent. is not for him.

On the other extreme he finds the dental parlors who resort to methods which are most revolting to him. What is he then to do? He is thus compelled to cast his lot with those men who practice on the remaining three per cent. Between these men and the dental parlors, the battle is constantly raging. The fees, the signs, the hours, of the last named practitioners, are almost entirely governed by the standards set by the dental parlors. See how pitiful is the plight of these men. Their professional yearnings crave to practice along the lines practiced by you gentlemen, but stern necessity compels them to adopt methods semi-dental parlor in fashion. Would that it were within my power to take you gentlemen and change your names, place you in localities where you are unknown, and compel you to shift for yourselves from the first. Only then would you realize what the members of the Kings Co. Dental Society and other practitioners of our class are compelled to contend with. If you would hang out a shingle, So-and-So, D.D.S., your empty stomach would soon compel you to throw out a sign as big as your office front would permit.

Now then, what effect has all this had upon the science of dental surgery? Look about you. Study the faces of the men here to-night. See how tired and worn they are. Hours from early morn until late into the night, without any opportunity for culture or refinement of any sort, in fine, without any opportunity to *live* in the true sense of the word, what must their attitude become towards this profession? It is that of hatred, as a slave hates his master. With such an attitude towards the profession, what chance is there for these men to do anything for the advancement of the science? The same conditions that robbed these men of practicing like human beings, robbed the science of dentistry of the brilliant ideas that might

possibly have germinated in their brains if they were fostered under favorable conditions.

This, then, is our case against the ethical guardians of the profession, very poorly put, but very deeply felt, and what do we get as a reply? It is ethics, etchics, ethics.

I tell you gentlemen that if your only charge against us of being unethical is because of our signs, your case fails most miserably, for I want you to understand that in our offices, so far as lies within our powers, ethics is practiced to the highest possible degree. Your charge against us adds insult to injury, for it is you who are directly responsible for the fact that we are compelled to vie with the dental parlors in the size of our signs in order that we might obtain sufficient practice to maintain our livelihood. I charge that because it did not mean a loss in dollars and cents to you in having these dental parlors within our midst, you have deliberately abstained from raising your finger in defense of the public upon whom these vampire organizations are preying. It is you then who are responsible for any methods that we are compelled to resort to in order that we may obtain a livelihood.

In view of the facts enumerated, it becomes the ethical gentlemen with ill grace to assume a "holier than thou" attitude. "Let him who is without sin cast the first stone."

"Phossy Jaw" Bill Passed

Both the House and the Senate have at last passed the notorious "phossy jaw" bill. This will insure the safety of over 4,000 match workers in this country, many of them women, by placing a prohibitive internal revenue tax on all matches in whose manufacture white or yellow phosphorus has been used.

According to an article in *Everybody's Magazine*, of the 4,000 persons working in the fifteen match factories in America 95 per cent. of the women, 82 per cent. of the children and 44 per cent. of the men in these factories are exposed to the dreadful diseases attendant on working with phosphorus, either "phossy jaw" or the form of poisoning known as phosphorism.

The fumes of the yellow phosphorus when inhaled dissolve with the saliva and attack imperfect teeth, the gums become infected and the teeth drop out. A necrosis of the jawbone sets in, which must either be removed by a surgical operation or a terrible and loathsome death results.

Not only is there danger of breathing the fumes of the phosphorus, but the ever present menace of the poison lies for the workers when they drink water contaminated with the poison and lack of care in washing the hands when eating.

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...The Progressive Dentist...

PUBLISHED MONTHLY BY THE
DENTISTS' STUDY CHAPTER, I. S. S.

Subscription price 50 cents yearly.

Free to Students

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to Dr. J. S. CALMAN
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Publication Office: 26 East 106th Street, New York City

EDITORIAL DEPARTMENT

The present number is most probably the best that we have so far issued, both in contents and mechanical make up, and as it will go to a greater number of practitioners than heretofore it will not be amiss to state what are the aims of the PROGRESSIVE DENTIST and why all radical members of the profession should support it.

We commenced publication five months ago and those of you who have read it noticed its improvement month by month. To-day it has surpassed our fondest expectations and its success is an established fact.

Originally we confined ourselves to propagate socialism among dental students, but we were irresistibly drawn into those great problems that confront the whole dental profession. Our socialism is not an utopian dream and as such we had to take a stand on all questions affecting dentistry, the dental practitioner and his relation to the common weal. We fought therefore the dental parlor as a scandalous fake perpetrated upon the great unknowing public. We fought for the abolishment of the use of yellow phosphorus in the making of matches, for a national law to regulate the practice of dentistry, for the socialization of dentistry, and for the free dental treatment of all school children, and we are just on the threshold of the aims we have set before us.

With your help we intend to fight for a national license and national regulation of dental colleges, we intend to bring to light the workings of some dental colleges that will raise such a protest from both the dental profession and the public as to make them close their doors forever. The reorganization of the dental societies so as to make them efficient and powerful organizations in their fight for the improvement of the profession and not the "rich dentist's-clubs" that they are to-day. We shall work for the establishment of dental clinics throughout the country, in charge of competent members of the profession paid by the state or city in

which such clinics exist to give free service to school children and all others that are in need of same, and last but not least we shall print from time to time articles on all phases of dentistry.

We believe that for the services the PROGRESSIVE DENTIST has done in the past and for the aim it has set for itself in the future, we have a right to demand support from the radical members of the profession if not from the entire profession. And what is that support; moral and financial. First give us your moral support which is even more important than your financial. From your moral support we draw the inspiration to carry out the aim we have set before us; therefore write to us, let us know what you think of the magazine, send us articles, reports, suggestions, etc., all of which we assure you will be greatly appreciated. And secondly give us your financial support, subscribe to the magazine and patronize those of our advertisers in preference to others, through whose advertisements we are enabled to carry on the publication of our magazine.

Why The Rev. Hill?

The famous or rather infamous socialist killer, the Very Rev. John Wesley Hill, who is always ready to "down" Socialism whenever it raises its proud head, has been given an opportunity to do so by the Faculty of the New York College of Dentistry at the commencement held in Carnegie Hall on June 3d. But like the knight-errant of wind-mill fame he succeeded only in unburdening himself of a torrent of language which bordered on the ridiculous, not to say hysterical.

The presence of such an individual as the Rev. Hill helped to advance one step further the cause which the PROGRESSIVE DENTIST advocates and the faculty is to be congratulated for the help they extend us.

The graduating class of 1912 marked an epoch in the spreading of socialist thought within the college walls. Literature was distributed, our monthly was launched, put into the hands of all the students, and as a consequence socialist discussions were the order of the day.

At first, we were ignored. Later, when our activity increased and along with it adherents from the student body, the college authorities tried to nip in the bud our propaganda. It was too late. Nothing availed. The spectre of socialism arose and it meant to grow.

Now, it had to be downed, cost what it may. And who could do a better or more cleaner "socialist killing" job than the Very Rev. John Wesley Hill?

Ergo, the smooth-tongued Reverend was appealed to. When he put in an appearance he forthwith proceeded to administer us a crushing blow. But lo! he counted without his hosts. He only completed the work which we began by bringing socialism to the attention of the remainder of the students and such members of the faculty that were otherwise hard to reach.

As to the speech. The "learned" Reverend's arguments were

so flimsy, his statements so false and his manner of delivery so hysterical that even those students who honestly opposed our propaganda were disgusted with this hireling of capitalism.

Commencement exercises are and ought to remain a purely college or students' affair. They should not be turned into political meetings. Hill's "oration" was purely a political tirade against a growing movement and as such it marred the occasion.

Besides, it is a time-honored custom to have the graduates addressed by a man of blameless character and reputation. Is the faculty of the college aware that there is a shady, a very shady side to Reverend Hill's character?

Why was Hill brought to the commencement?

Why was this questionable, frothing individual, this unwelcome guest thrust upon those who were at Carnegie Hall on the night of June 3rd?

We wish to announce that with this issue of the *PROGRESSIVE DENTIST* we suspend publication for the months of July, August and September, to begin again with the October, 1912, number. All who desire to receive the October number should send in their subscriptions to our business manager, Dr. J. S. Calman.

Arrangements are being made to have all papers read before the Harlem, Eastern and Kings County Dental Societies reprinted in the *PROGRESSIVE DENTIST*, beginning with the October number, so do not fail to subscribe to same.

The Intercollegiate Socialist Society

By HARRY W. LAIDLER, Organizer

Prior to the Presidential election of 1904, Socialism was regarded by large numbers of America's educated men and women as a foreign movement, concerning which it was entirely unnecessary for them to be informed. The vote that year, however, aggregating as it did, more than four hundred thousand, an increase of four hundred per cent. over that of 1900, showed this view to be entirely false.

The remarkable increase in Socialist sentiment in the United States indicated by this vote made it evident to a number of well known publicists, among others, that the time had come when the students and graduates of our higher institutions of learning should be made to realize the real meaning of the International Socialist Movement. They believed that a movement such as Socialism, which had grown in voting strength alone during the previous generation and a half from a few thousand to between eight and ten million in the various civilized countries in the world; a movement which had

already accomplished such remarkable results in the extension of political democracy, social progress and human brotherhood; a movement, finally, which proposed such far reaching economic changes—the abolition of involuntary poverty, of gross and unjust inequality of wealth, the elimination of want on waste of human life and energy, and the securing, through collective ownership and democratic management of the principal industries of the country, an industrial democracy under which the world's producers would control their own industrial life—a movement with such strength and vitality, a movement with such achievements, a movement with such aims and purposes, would if brought to their attention, secure the earnest interest of thousands of the best intellects in our academic centres.

A call was thereupon issued by Oscar Lovell Triggs, Thomas Wentworth Higginson, Charlotte Perkins Gilman, Clarence S. Darrow, William English Walling, J. G. Phelps Stokes, B. O. Flower, Leonard D. Abbott, Jack London and Upton Sinclair, in September, 1905, for the organization of the Intercollegiate Socialist Society. The aim of the Society was to promote an intelligent interest in Socialism, not only in the colleges, but among educated men and women throughout the country. Jack London was elected the first President; Upton Sinclair and J. G. Phelps Stokes, the Vice-Presidents; Owen R. Lovejoy, Treasurer; and Mrs. Katherine M. Meserole, Miss M. R. Holbrook and Messrs. George Willis Cook, Morris Hillquit, Robert Hunter, Harry W. Laidler and George H. Strobell, members of the Executive Committee.

The Society met with immediate response. During the first two years its attention was confined, for the most part, to securing the names of interested friends and placing the Society on a firm foundation. Fred. Merrick and George R. Kirkpatrick were successively appointed Organizers from 1908 to 1910, and did much valuable work in the formation of undergraduate Chapters.

But the most pronounced growth of the I. S. S. has been evidenced during the past two years, partly as a result of the still greater strides taken by the Socialist movement, and partly because the Society has been better equipped to meet the growing demand for information concerning Socialism made by the college students of the country.

The undergraduate chapters during 1910-11 increased from 11 to 29, while the Society's growth in the present college year has brought the number to 48 undergraduate and 5 alumni chapters. In the past year hundreds of lectures on Socialism and allied subjects have been given before I. S. S. chapters, and over 50,000 leaflets of the Society have been distributed. A feature of the season's activities worth special mention has been the issuance of periodicals by chapters themselves. The New York Dental Chapter has taken the lead with the publication of a monthly periodical, *THE PROGRESSIVE DENTIST*, and the Harvard Chapter has prepared its first Tract on Socialism.

Of the forty-eight chapters now in existence, the middle Atlantic States and the middle West have 17 each, the New England States, 10, the Pacific Coast, 3, and Canada, 1. New York State has a dozen organizations, 8 of which are in New York City. There are eight professional schools represented in the group, including three for physicians, two theological seminaries, two dental and Y. M. C. A. training schools. Of the chapters in these technical schools, the Dentist Chapter is the largest and most active. This Chapter is also among the first half dozen in membership of the entire number of undergraduate groups.

The Intercollegiate Socialist Society believes that it has already justified itself. It has been the means of leading hundreds of college students to a realization of the true purpose of the Socialist movement, and has broadened the social consciousness of thousands of graduates and undergraduates. It, however, realizes that its task has only just begun. There are in this country more than thirteen hundred colleges, universities and professional schools, with a total student membership of nearly 250,000. The Society's work will not have been accomplished until all collegians are intelligently informed on this biggest problem of the twentieth century.

The Society has its active headquarters at 105 West 40th Street, New York City, where literature and information will be gladly given concerning its work. The present officers are: President, J. G. Phelps Stokes; 1st Vice-President, Mrs. Florence Kelley; 2nd Vice-President, Ernest Poole; Treasurer, Morris Hillquit; Secretary, Leroy Scott; Organizer, Harry W. Laidler; Miss Jessie Ashley, Prof. Frank C. Doan, Mrs. Jessica G. Finch, Miss Jessie W. Hughan, Ellis O. Jones, Harry W. Laidler, Miss Mary R. Sanford, Prof. Vida D. Scudder, Miss Helen Phelps Stokes, Bouck White.

The Dentists' Study Chapter, I. S. S.

By Dr. M. S. CALMAN, President

About two and a half years ago, a number of students of the New York College of Dentistry, having heard of the work of the Intercollegiate Socialist Society in organizing Study Chapters in a number of colleges throughout the United States, for the purpose of interesting college men and women in Socialism, decided to organize a Study Chapter of dental students and dentists. These men met at the Rand School of Social Science on February 13th, 1910, and with thirteen men present, organized the Dentists' Study Chapter of the I. S. S.

Prof. George R. Kirkpatrick, author, lecturer and debater, who was at that time the organizer of the I. S. S., addressed our meeting on "The Aims and Purposes of the I. S. S."

Dr. S. Ph. Ratner was elected president of the Chapter.

Meetings were held once a month. The first year of the Chapter's existence was devoted to propaganda, in order to interest our fellow students in the work of the organization.

Chapter Activities

Lectures 1910.

April 10, 1910—Dr. S. Ph. Ratner lectured on "Socialism and the Dental Profession."

June 10, 1910—Dr. S. Gettenberg lectured on "The Anti-Social Writer is of More Benefit to Society than the Social Writer."

No meetings were held during the summer months of 1910. The next regular meeting took place in October. Dr. Wm. Mendelson was elected president of the Chapter.

Lectures 1910-1911.

October 7, 1910—Dr. L. Rice lectured on "Freedom of the Individual."

January 6, 1911—Dr. Wm. Mendelson lectured on "Employers' Liability and Workmen's Compensation."

June 2, 1911—Dr. Wm. Mendelson lectured on "Trade Diseases, Causes and Cure."

STUDY COURSE.

The Chapter took up the study of comrade Morris Hillquit's book on "Socialism in Theory and Practice."

OUTINGS.

During the summer months of 1911, the Chapter held a number of outings which were well attended by the members and their friends.

SOCIABLES.

The Chapter on June 2, 1911, held its first sociable at the Bronx Forum. Refreshments were served. Miss Offerman rendered a number of musical selections.

In October, 1911, Dr. M. S. Calman was elected president of the Chapter, and during his administration the Chapter was most active. Business and literary meetings were held every first Friday of the month.

Lectures 1911-1912.

November 3, 1911—Comrade Harry W. Laidler, organizer of the Intercollegiate Socialist Society, gave the history of the I. S. S. and urged those present to get acquainted with and spread the gospel of Socialism.

Dr. N. A. Posner then opened a discussion on "Medical and Dental Practice at the Present Time and How it Ought to Be."

December 1, 1911—Dr. Herbert L. Wheeler of the Health Department, lectured on "Oral Hygiene," at an open meeting of the Chapter, which was held at the Eclectic Medical College. The lecture-hall was taxed to its full capacity.

January 5, 1912—Dr. Wm. Mendelson lectured on "What Socialism Is."

February 9, 1912—Comrade Robert W. Bruere, A.B., A.M., former instructor in English at the University of Chicago, lectured on "The Professional Man and Socialism."

March 8, 1912—Dr. Wm. J. Robinson, editor of The Critic and Guide, etc., President of the American Society of Medical Sociology, lectured on "True Eugenics—Three Means of Improving

the Human Race." For this occasion Sheutzen Hall was hired.

April 5, 1912—Dr. Lena Robins lectured on "Forces Making for the Emancipation of Woman."

June 7, 1912—Dr. M. S. Calman lectures on "Whither Are We Drifting?"

Discussion followed the lectures.

LEAFLET.

On the occasion of the lecture on "Oral Hygiene," by Dr. Wheeler, the Chapter issued a leaflet "The Collegiate," which treated on the subject of oral hygiene from the Socialist standpoint. The leaflet was distributed among the dental students of this city.

MONTHLY MAGAZINE.

In January, 1912, the first issue of the PROGRESSIVE DENTIST, a monthly magazine of 12 pages at first, then 16, 24 and this the June issue of 44 pages, was issued regularly by the Chapter. Dr. Wm. Mendelson is the Editor-in-Chief, and Dr. J. S. Calman, the Business Manager. Subjects on dentistry and medicine and articles on Socialism are the chief features of the magazine. The PROGRESSIVE DENTIST is mailed, free of charge, to the home addresses of all the dental students in this city. Several hundred dentists are subscribers, copies are sent to every chapter of the I. S. S., and we have exchanges with a number of Socialist papers and magazines and with dental journals.

MUSIC.

At the January and February meetings, Miss Rose Karasik rendered a number of vocal selections.

FIRST ANNUAL BALL.

On the 16th of February, 1912, the Chapter held its first annual Full Dress and Civic Ball at the Royal Lyceum. The affair proved an all around success.

Beginning with a membership of thirteen, the Chapter to-day numbers 56 members. The prospects for the future are very bright.

Ignorance. The College and Socialism

By WALTER LIPPMANN.

We hear a great deal these days, especially from the colleges, about Socialism being on trial. Whenever, as a member of the Intercollegiate Socialist Society, I break through the academic calm to help poison the mind of the undergraduates, the invariable attitude of the authorities is something like this: "Hm, well I never * * * you don't say, well Socialism—chapters in forty-six colleges * * * I see. I see. To be honest with you I'm not a Socialist. I'm waiting to see how it works." The number of college authorities who come from Missouri is amazing. If Virginia is the mother of presidents, surely Missouri is the mother of college presidents.

We are not always as polite as we should be. In that case the Socialist turns to the professor and says: "Yes, Socialism is on trial. People all over the world are trying it to see whether it can end the thousand wrongs of poverty and tyranny that cry to Heaven for a

remedy. That's a great trial now beginning to be heard before the Supreme Court of the People. But there's another little trial going on—off there in a petty court. The colleges are being tried there; the case has been on for some time and the jury is about ready to bring in a verdict that the colleges are guilty of ignorance, incompetence, respectable corruption and criminal neglect of duty."

The more a man comes in contact with the average professor, the more he is driven into the attitude of a great English playwright on the day before his play was to be performed. Said a friend to him:

"Aren't you afraid your play won't be a success?"

"Not at all," he replied, "I'm dreadfully afraid the audience won't be a success."

And so when you look from the terrible problems that men are facing in the world to the professors who are supposed to be preparing thousands of men to meet those problems, what can you do but tremble and say: "I'm dreadfully afraid those college professors won't be a success."

Now it is easy enough to see why college authorities are afraid of Socialism. It's a kindergarten lesson in economic determinism; the colleges need money; they get it from rich people; rich people as a rule don't like Socialism. Who pays the piper calls the tune; who endows the college strangles free speech.

But just because the colleges won't educate their students in the greatest political issue of the day is no reason why the students shouldn't educate themselves. We learned pretty quickly at Harvard that if we waited for the faculty to enlighten us we'd be waiting when the cows came home. In the first place, they wouldn't enlighten us, and in the second place, they couldn't.

The faculty stays in the college but the student goes out into the world. And there he meets strikes and panics, poor pay and long hours, terrible jobs and no jobs, hate and bitterness, ugliness and filth, cynicism and corruption. He is tossed about helplessly on a stormy sea with no compass to guide him, and he curses the years he spent at college. There was a time in which he might have been prepared for this. Often as not he drifts blindly into some position where he must do somebody else's dirty work as a lawyer, an engineer, a writer, a preacher or a manager. He holds on to his position for dear life—a thousand men are reaching for it. He becomes involved in the muddle, a partner in crime. Then it's too late; he has friends, family, connections dependent upon him, and the sacrifice demands for a break with it all is too great for his courage. The world passes him by.

He wasn't educated; he didn't go out into the world with his eyes opened. The Socialist movement could have saved him. Had he come in contact with it in college he would have had a grip on affairs, a key to many mysteries; he would have handled life instead of letting it handle him. The college man needs Socialism for his own soul's good.

And Socialism needs the college man. It needs all the trained intelligence and all the technical skill it can command. This task of

remaking society is not something that will come by itself; it will not follow automatically from a Socialist victory. It will not come because we want it; it will come only because we make it. In the history of the world, men have never attempted anything so audacious as the deliberate reconstruction of society. It will take all the wisdom they have, all they can get. They will need men trained to the task; they have a right to demand help from the colleges.

This problem concerns college men. They will have to live in this new world. They had better take part in the making of it.—*Schenectady Citizen*.

Democracy In The College

S. A. ELIOT, JR., President Harvard Socialist Club.

Negative Democracy, I take it, must be attained before positive Democracy is possible, just as one must be free *from* bonds before one is free *to* act as one wills. Negative Democracy consists in the absence of government or control of one body, the majority, by another. In colleges, this form of Democracy is almost totally wanting: the students are under the authority of officers and faculties over whom they have no control.

Beside this paternal government from the top, the problem of democracy in the sense of fellowship wanes into insignificance. Occasionally, and indeed more and more often, the college heads try to enforce, in their veiled and covert manner, the conception of democracy they hold. They try to bring all classes among the undergraduates not merely into communication but into fellowship and the pursuit of common ends. Great dining halls for the whole college, uniform dormitories for the senior and freshman classes, and many another scheme, are advanced as helpful to the spirit of democracy and aided with all the influence of the college office. However well intended, this interference with the natural grouping among the students must be condemned. It is comparable with the Civic Federation trying to persuade workers and capitalists that their interests are identical, but is far worse than that folly because this Federation has the power to carry its notions into effect, supported by the "loyalty" and "college spirit" of the unthinking (the vast majority) of the students.

The class struggle exists among undergraduates: there is enmity, though no waging of war save at rare moments. The division is no sharper than in the outside world, but it is no easier to bridge than there. As Socialists, we should welcome every intensification of class consciousness and frown upon all efforts to erase it. Therefore, I believe the social split within each college should not merely be accepted, but encouraged.

The interference of the authorities is even more obnoxious in intellectual affairs than in social. To be told what one shall study and what one shall postpone or avoid must be revolting to every free spirit; and far worse is the command that thus far and along this

path only, shall one pursue any branch of learning. A capitalistic bias is of course unavoidable in endowed and State universities alike, but the monopoly which the faculties exert or attempt to exert over the whole mental life of the college, even to the limitation of free speech, is frankly intolerable. Its effect is to imperil the reputation of the college among radical thinkers outside, and compel the radical thinkers inside to educate themselves, with constant friction, and often in direct opposition to the teaching in their courses and with detriment to their academic standing.

This, then, is the immediate difficulty. But even if negative Democracy were obtained and the colleges were run by the students, there could be no relief in the midst of our wild sea of capitalistic civilization. The scions of the classes who ruled outside would rule inside the college, and in the same manner, of course, the issue would become clearer and the gulf pronounced—desirable outcomes both—but the problem would remain. The college is not separate from the world; and freedom, that is positive Democracy, will continue to be impossible in the college so long as it is crushed outside.

What Is Socialism?

By Dr. Wm. MENDELSON

The theory of Socialism presents itself under two main aspects. First, as a philosophy of history by means of which the economic forces underlying the great historical events can be explained. Second, as a political program having for its object the abolition of the present form of capitalist society and the substitution of the co-operative commonwealth.

In this article I shall attempt to explain the cardinal principles upon which is based both the philosophy and program of the Socialist movement.

Like all social theories Socialism is the result of growth in the domain of social thought. Before the advent of Karl Marx and Friedrich Engels, who laid down the basis of the socialist philosophy, it was in a state of utopia. That is to say, the early socialists were utopians. The marked difference between the utopians and the present-day scientific socialists, is that the former did not understand the social forces at work in society.

The utopian socialists earnestly protested against the injustices of their time. By vividly picturing the unbearable conditions under which the workers lived, previous to and after the great Industrial Revolution, and by advocating ideal utopias seeking to remedy them they called the attention of men's minds to the social questions agitating the reformers of their time. According to their social philosophy society could be shaped so as to correspond to cut and ready-made plans. Unable to comprehend the evolutionary process through which society passed, they believed that it could be changed by one stroke as it were. (Saint Simon, for instance, called upon two people to lead the revolution against the chaotic social conditions of Europe

at that time. One was King Louis the XVIII, the other was the Pope. Of the other French utopians, Charles Fourier, it is related that he waited in his home at the noon-hour of every day, until his dying day, for a millionaire to come along and offer him the money which he needed to establish his ideal society.

The early utopian socialists were men with a vision of better things to come, but had no definite program tending towards their realization. They planned, advocated and established so-called ideal communities in the midst of the growing bourgeois world. A great number of them flourished and failed in this country. They were doomed to failure because no new social system can be established unless it is the direct outgrowth of the one preceding it.

As Marx says in the Communist Manifesto: "In every historical epoch the political and juridical superstructure can only be explained from its economic basis."

Scientific or modern socialism is distinguished from utopian socialism through two cardinal principles, i. e., the theory of the economic interpretation of history, and the class struggle.

The economic interpretation of history, or economic determination, as it is mis-named, is the theory that the economic factor, or the method by which a people secure their livelihood, is one of the most important factors in determining or shaping their political, ethical or social life. This important theory of socialism was first formulated by Karl Marx and Friedrich Engels about a half a century or more ago, each independently of the other, and later strengthened by the researches of the great American anthropologist L. Morgan. It is gaining ground from day to day even among capitalists, economists and historians. It did for the field of history and economics what Darwin's theory of evolution has done for biology.

It is the key to the proper understanding of all historical epochs. Without it all the different historical epochs with their political and juridical superstructures would be as hard to explain as the origin of man from the Simian ape without the theory of evolution. Take for example some historical phenomena that stand out boldly upon the pages of history and try to explain them in the light of this theory. Prior to the economic interpretation of history, historical events were explained as the doings of kings. It was the "great man" theory. Bloody wars were carried on because of the whims of kings and queens. But it was not thus, no matter how nice it may sound. If you tried to explain cannibalism for example, by the "great man" theory you will soon learn the fallacy of it. Cannibalism had a purely economic basis for its existence. The tribes during the middle status of Barbarism lived mostly by what they got through hunting and fishing. When they came in contact with other tribes during the chase, the prisoners of war were eaten, simply because they were a burden to them. They could not allow them to carry weapons and help in the chase, as they could turn these weapons against their masters. Having no other occupation for them, they were an economic burden and that is the reason they

were killed and devoured. When the various tribes began to raise stock and cultivate the land, these captives of the battle became from an economic burden an economic necessity to their masters. They could now be employed in the raising of cattle and the tilling of the land. And thus it became morally wrong and legally punishable to eat captured slaves. Do you imagine that these tribes were conscience stricken now? Not at all, a simple change in their economic system brought a corresponding change in their morals and laws.

I present for your consideration another historical phenomenon and see whether you can explain it any other way except in the light of the economic interpretation of history. The position of women in primitive society was politically higher than that of the women prior to the beginning of the 20th Century. Now it is again changing and she is again gaining her former political position. What is causing this change? As long as the instruments of production, i. e., the tools necessary to secure a livelihood, were simply those of the chase the work rendered by the man was of no more importance to the community than that rendered by the woman. In some instances the work she performed at home in preparing the food, in making clothing out of the skins, etc., was even of greater importance than his. Thus we find her on the same footing economically with man and taking part in their political counsels. With the introduction of agriculture and the development of industries in which she took no part her political influence disappeared in the same proportion as her economic importance was lessened. To-day she is again becoming an economic factor in society, and is therefore gaining in her political importance.

I believe I have pointed out sufficiently the importance of the understanding of this cardinal principle of socialism.

Now as to the class struggle, the other cardinal principle of socialism. We are often accused of fomenting the class struggle. Our opponents say that it does not exist. We socialists are simply pointing it out showing how it inevitably leads the workers to class conscious political action.

To-day, as you all know, we have reached a system of production known as the capitalistic system where commodities are produced, not so much to satisfy human wants as to make profits. The workers' labor-power is as much a commodity in production as leather in the making of shoes. This commodity which the workers possess and which they are forced to sell to the capitalist class is regulated by the same laws of supply and demand which regulates all other commodities. It has been proven that the wages which the working-people receive represents the amount necessary to keep themselves alive and reproduce their kind. The amount they produce in the first four hours of labor, all over and above that goes to the master class as their profit by virtue of the ownership of the tools of the industries which the workers must use. What is the result? There is a constant struggle between the working class and the capitalist for a larger share of this profit. This struggle we socialists call the class struggle. At times it is quietly going on, at

other times it is more violent, but it goes on constantly bursting out in vigorous form every now and then. It is hardly necessary for me to prove it to you. Every strike, boycott, lockout, the recent McNamara case, all attest to this ceaseless economic struggle going on between the working-class and the capitalist class.

What is the result? In this struggle the workers are becoming more and more conscious of their interests. They begin to realize that they must unite politically as well as economically. Socialism teaches them that by capturing the powers of government and changing the socially necessary industries from private to collective ownership, they will put an end to all forms of class struggle. The socialist movement points the way, and the hosts of labor are rapidly gathering around its banner

Insurance Traps

By HENRY M. FRIEDMAN.

Traps, traps, traps; this world is full of them—but surely an insurance policy ought to be the last place on earth where they should be found. No safer wager can be made, however, than that nine out of every ten policies written for dentists are materially defective in some way or other and sadly fail to afford the very protection that is expected of them. The writer has personally made an inspection of something like three hundred fire insurance policies written for dentists and in fully two hundred and seventy-eight cases has found either the regular household-furniture form or else the mercantile form, with additions or insertions which—like a certain brand of Castoria—were “perfectly harmless” to the insurance companies.

Even the layman, however, would understand, were he to give the matter one-tenth of the attention that it really deserves, that the dental office should have a form peculiarly its own, calculated to meet the special needs of the dentist, who is neither a private householder nor a merchant.

Thus, projecting and other signs—some of them very expensive—are rarely provided for in the average policy carried by dentists, especially if it reads, as so many of these policies do, “all while contained in the building situated No. —, etc.”

The biggest trap of all, however, consists in the failure to specify and provide for losses on finished work, such as plates, bridges, crowns, etc., none of which would be covered by a mere household or even a “dental-furniture-and-instrument” form of policy.

Just recently an insurance company refused to pay a considerable loss on dental work because of such an unpardonable omission in a dentist's policy.

Another trap is that in which the installment-paying-dentist so frequently falls. Hundreds of these dentists never take the trouble to read over their purchase agreements, almost all of which provide for the insuring of the articles purchased, and are not a little sur-

prised to find that the companies will only re-imburse them to the extent of the amount actually paid on these articles, unless express provision is made for the protection of the balance still due. This means that the dentist remains liable to the installment firm for such balance without hope of any re-imbursement whatsoever.

Still another trap of frequent manifestation is that connected with the matter of improvements. Most policies do not cover the cost of installing your outfit or the cost of the electric wiring, plumbing or any improvements made and paid for by the insured, yet there is no reason why the dentist's policy should not cover such improvements.

Burglary Policy Traps

What has been said of fire policy traps is quite as much applicable to all other forms of insurance carried by dentists. Burglary policies, in particular, are pregnant with traps, inasmuch as these often fail to cover gold, silver, platinum and other precious metals used in dentistry.

Object of Liability Policies Misconstrued

This alarming indifference among dentists as regards insurance matters results, however, not merely in the presence of multitudinous traps in the policies actually carried by them, but also in the absence of both traps and policy in matters where one would expect at least the pretense of protection. This is especially true of liability insurance, or insurance against alleged malpractice. On more than one occasion, during his early days in the insurance business, the writer met with a totally unmerited measure of indignation at the hands of dentists possessed with a mania for both the word and the spirit of ethics, upon his suggestion that they protect themselves "against suits for negligence and malpractice." Experience has since taught the writer to add and to emphasize the word *alleged*. Many good and skillful practitioners there are, who slumber in sweet ignorance of the fact that a huge metropolis like New York City is sadly teeming with hosts of so-called "shyster" lawyers and both hardened and frightfully unscrupulous blackmailers and perjurers in whose hands they may at any time fall as ready victims. Judges and juries—to say the least—are human, and that means that "I. M. Innocent, D.D.S." may one of these days find himself ostracized from both patients, bank and profession because of a judgment procured against him for several thousands of dollars on the ground of "alleged malpractice." Only a few weeks ago a jury in the Supreme Court of New York County brought in a verdict for \$16,000 against a certain dentist for damages resulting from the use of "alleged" infected forceps, and but a few days ago an action was commenced in the same court to recover the sum of \$35,000 for damages resulting from the "alleged" use of unsterilized instruments. Only the other day one of the writer's own clients, a very reputable dentist, successfully extracted a badly decayed root, but received a lawyer's letter a few days thereafter to the effect that he—the lawyer—had shown the extracted tooth to another dentist who was prepared to testify

that the tooth was perfectly sound and good when extracted. Evidently a good tooth was obtained for the purpose of this lawsuit. Fortunately for this dentist, however, he is equipped with an excellent liability policy, so that the case is now in the hands of the legal department of one of the most reliable Insurance Companies in this state. Incidentally, this policy was obtained at the cost of but \$10.00 a year, or at less than 84 cents per month.

The writer has in several of his pamphlets on this subject repeatedly pointed out the fact that no practitioner, no matter how high his standing, is proof against the "shyster" lawyer, who furnishes legal services upon a contingent fee to be paid out of the damages collected. The unscrupulous claimant is at no expense, has nothing to lose, but may gain large damages, and will certainly cause his victim great annoyance, worry, expense, loss of time and a consequent impairment of the practitioner's usefulness. It will cost you considerable money to win if you are sued for malpractice, but it will cost you much more if you lose, unless you have a Professional Liability Policy that not only provides legal services, but pays the loss if a verdict is rendered against you.

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THE PROGRESSIVE DENTIST

Volume II

Oct. 1912

No. 1

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HEMOPHILIA

Arthur S. Calman, M. D.

This is a pathologic condition with which the individual dentist meets rarely, but which, nevertheless, is of sufficient importance for him to recognize, for he will be saved a great deal of anxiety and undesirable notoriety if unfortunately he should come across such a case in his practice.

By the term hemophilia we have come to understand a hereditary pathologic state of the body with a tendency to spontaneous or traumatic bleeding.

The etiology and pathology of this condition are unknown. A number of noted authors think that the uncontrollable bleeding in these cases is due to a defect in the structure of the walls of the bloodvessels; this view, however, has so far not been confirmed by post-mortem examinations. The coagulation of the blood in these cases is much retarded; normal blood coagulates in about 4-7 minutes, whereas the blood of a bleeder will coagulate in 15-25 minutes and in exceptional cases as long as 45 minutes. The theory of coagulation, as at present understood, cannot explain this phenomenon, for the composition of the blood taken from hemophilic subjects has been studied carefully and nothing abnormal found. It is also known that no particular races are prone to this disease, all are equally subject to it.

The symptoms of hemophilia are manifested in more or less uncontrollable hemorrhages from any part of the body, occasionally of spontaneous but in the great majority of cases of traumatic origin. These attacks may be accompanied by subcutaneous hemorrhages and swelling of joints with or without rise in temperature.

As to the diagnosis of this anomaly it may be said that there is nothing characteristic about the physical appearance of a bleeder. But the fact that this condition is in almost all cases congenital or hereditary will put us on guard against attempting even the most minor surgical operations on such individuals. The transmission of this constitutional anomaly from parents to their offsprings works out very beautifully and almost law-like. Given a "bleeder family" it will be found that the father who is a bleeder will transmit this tendency to his grandsons through his daughters and not through his sons, the daughters themselves not being bleeders; also that the male members are a good deal more prone to this disease than the female members of the family. With this most important fact in view we should deem it imperative to go very carefully into the history of every patient who is to be exposed to the most minor operation, be it the removal of an ingrown toe-nail or the extraction of a decayed tooth, and we should first of all try to eliminate a history of previous uncontrollable bleeding either personal or hereditary; for there are various degrees of severity to hemophilia. A patient may have a number of hemorrhages and recover quickly after each attack, and on the other hand, the very first hemorrhage may prove fatal in another case.

In treating these cases, every attempt to check the bleeding has so far

proven unsuccessful. Astringents of various descriptions, continuous pressure applied to the bleeding surfaces, cauterization with acids and pure phenol, and even actual cautery have been of no avail. Lately subcutaneous injection of horse serum or even better human serum has been tried with some good results, but this therapeutic measure is still in its experimental stage.

I shall now cite three cases which have recently come under my observation illustrating the various degrees of severity which we are apt to meet in this condition.

Case 1. Male, single, 25 years of age, German, has two brothers bleeders, one sister not subject to this tendency. Dentist attempting to extract a molar lacerated the gum slightly. The blood began oozing from traumatized area and every attempt to check it proved futile. Eight hours after the bleeding commenced patient received a dose of 40 c.c. of horse serum (diphtheria antitoxin). The oozing continued and twenty hours later ceased entirely.

Case 2. Male, 14 years old, Hebrew. Had tooth extracted several years ago after which he bled continuously for 5 days. Present trouble began after extraction of one of his molars. Blood began oozing from injured gum without a stop. Every available therapeutic measure tried resulted in complete failure. On 3rd day patient received 30 c.c. of horse serum, but no improvement was noticed. On fifth day he became delirious, restless, attempted to jump out of bed and at one time his condition became so poor that recovery was almost despaired of. Shortly after patient assumed a ghastly appearance, pulse became very rapid, small, and of very low tension. But on the tenth day he suddenly ceased bleeding, began to pick up gradually and made complete recovery at the end of 6 weeks. This patient during the period of his illness had several of his joints swollen, which is one of the manifestations of hemophilia.

Case 3. Male, 7 years old, Italian, operated on for adenoids. No history obtainable before operation for neither the father nor the boy understood English. Half an hour after the operation patient vomited a large quantity of blood and was put to bed immediately under close observation. One hour later he had another attack of hematemesis. Naso-pharyngeal examination revealed constant oozing of blood from raw surface of traumatized mucous membrane. Attempt to check the bleeding proved futile. Patient vomited large quantities of blood at various intervals, pulse became very feeble and rapid and finally patient died 12 hours after the operation. History obtained later through interpreter revealed the fact that two older brothers of patient and several members of the family on the mother's side were bleeders.

It is, therefore, in the interest of the dentist to learn of the nature of this disease so as to be able to do what is right for his patient and also to avoid unnecessary trouble for himself. From the dentist's point of view then, we may assume, that he is justified in refusing to extract diseased teeth of a hemophilic subject. But on the other hand, what is to be done with a patient who presents himself to you with a markedly decayed tooth necessitating extraction? Should such patient be allowed to suffer untold agony or should the dentist extract the tooth and thereby expose his patient to a probable death?

The solution to this unfortunate problem lies in the employment of prophylactic measures and in the closer co-operation between the physician and the dentist. A physician usually knows the family he treats more thoroughly than the dentist does, and with members of a "bleeder family" under his care the physician should not only instruct them to guard against trauma of any kind, but should also see that the children be placed from their early infancy under the care of a competent dentist who should institute the best prophylactic measures known to the dental profession.

Professional Ethics A Conventional Lie

Dr. L. E. Evslin

Does an ethical man designate one who is proficient in his profession, and who is honest and conscientious in his work, or the term "ethical" applies simply to the man who has a small sign at his door? The answer, of course, will be that the term means both. In the first place, it is a well known fact, that by far not all men that style themselves ethical can compete successfully with their so-called "quack" brethren in professional efficiency. The same can be said about honesty and conscientiousness in their work. The above statement can be easily proven by the great mass of dental work done by the so-called ethical man, which is below the standard of the work done in a great many advertising shops; and last, but not least, the apparent dignity of the majority of ethical men is also a chimera, for they advertise themselves just as extensively as any given "quack," the only difference being in the methods employed for that purpose.

One man opens an office and makes a large display of signs, and announces his business with a liberal distribution of hand-bills. The man across the way satisfies himself with a small sign at his door, and sends out a couple of thousand finely engraved cards. In the first place it is called quackery, and in the second instance, it is proclaimed to be ethical. Why? Is it not rather a question of taste than principle? True that in the first instance the taste is rather vulgar, but it is a question of taste nevertheless; the same as in the case of one wearing a sparkling diamond stick pin in his cravat the other man satisfies himself with a modest pearl pin, while the third man satisfies himself with a still more modest "no pin at all." One man is a good church member; the other a club man; another, a member of a dozen various societies; another, spending a good deal of his time visiting; still another employing his wife and the rest of his family peddling with his cards. All these men, providing their signs are small, are ethical men, although none of them do the above business for their health. In fact, most of them would prefer to take fresh air, or sit at home and read a book instead, especially in the case of a dentist, who has so little time for exercise or self-culture. It is evident, therefore, that this advertising one's self through the different mediums is part of the business, and is a necessity, and yet when the man across the street does the same thing admittedly in a less attractive manner, but who may be just as good a man otherwise, is called a "quack." Thus, we see that the term "ethical" is not only meaningless, but that it tends to injustice. However, there is nothing unnatural about this; it is only one of the conventional lies with which the present society is so abundant. We are living in a competitive system in which every man is thrown upon his own resources.

The exceptions to this rule are the remnants of the old European aristocracy, and the offspring of the new plutocracy. Men engaged in the liberal professions are not exempt of this general rule, although occasionally a man may start his professional career under more favorable circumstances than the rest of his brethren. A great majority of the young professionals, however, find the professional roads difficult to climb, and competition is, as a rule, their first visitor. Hence, in order to subsist at all, there is no choice in many cases as to the means of attracting the public's attention, and the last analysis therefore, we come to the old story that the under-

lying principle of all the wrongs and injustices are caused by the absurdity of our economical system, a system of perfect anarchy, when men are forced to compete and cut one another's throat unnecessarily. Imagine an orderly society where professions are regulated; there would be no need for publicity or quackery, and certainly not any more than is necessary for a municipal school teacher to get enough pupils.

Occupational Diseases

Dr. Wm. Mendelson

Diseases due to occupations are as old as the different trades themselves. A good many of them are of recent origin following in the footsteps of new industries. Due to our modern capitalistic system with its intensified form of production the number and seriousness of these industrial diseases have increased to such an extent that medical men and sociologists began to study and classify them.

Dr. Van Der Borgh defines an industrial disease as one which arises as the result of prolonged action of harmful influences of certain trades commonly occurring in persons working in those trades.

Industrial diseases are divided for purposes of study into four classes, i. e., those due to dust of various kinds, to chemical poisons, to germ infections and lastly the miscellaneous class to which belong maladies arising from overexertion, compressed air, unhealthy positions while at work, etc. I will begin with the last class, not because they are more important, but because they are of more recent origin.

Caisson disease is probably the newest and most mysterious of these maladies. It has become very common since the erection of soaring skyscrapers, which necessitate the laying of deep foundations. It attacks workmen who pass from the high pressure in the underground chambers to the caisson where they are working to normal surface air pressure. The symptoms of caisson disease are quite marked. It begins with a dizziness of the head, soon followed by neuralgic pains spreading all over the body, commonly known among the workmen in this line as the "bends," finally resulting in paralysis and ultimately in death.

The legislature of the State of New York passed a law relative to the use of compressed air in caisson tunnels and other works, which contains, among other provisions, a clause limiting the hours of labor to six in all works where the air pressure exceeds 28 pounds per square inch; these six hours to be divided into two periods of three hours each, with an hour's intermission. It also provides for the constant attendance and presence of a medical man at such works. The law is to take effect in September, 1912. It remains to be seen whether it will be enforced.

The diseases due to overwork are numerous. They occur in the muscles of the toes of the ballet dancers, the throats of the auctioneers, causing "Auctioneers' Spasm"; the eyes of the printers, and of the miners, causing, in the latter, what is known as "Miners' Nystagmus." When the malady appears lights seem to dance before their eyes; they suffer from dizziness and falter at their work. This is due to the lying position assumed while at work and the straining of the elevator muscles of the eyes in looking upward.

Glass workers and steel workers suffer from the rapid changes of temperature in passing from one room to another.

GERM INFECTION.

This class of diseases, the result of occupations which bring workmen in contact with the various infected materials, although less numerous, are by far more dangerous.

Scarlet fever, small pox, tetanus of the jaw and other acute and often fatal maladies are the scourge of the workers engaged in the hides, skins, woollens, rags, shoddy or hemp industries.

Furriers often contract an ugly disease due to some microbe which causes their finger nails to loosen and fall off.

CHEMICAL POISONS.

Bulletin No. 100 of the Department of Commerce and Labor mentions no less than 54 industrial poisons whose constant use in various industries produce fatal results.

Here are some of the most important: Lead poisoning occurs among workmen engaged in smelting of lead: articles made of metallic lead, such as sheets, plates, boxes, wires, cans, flasks, pails, kettles, faucets, etc., in type foundries, bottle caps, composing rooms, file cutting works, manufacture and use of lead colors, etc. The number of workmen coming in contact with lead is therefore legion, for it is claimed that materials containing lead may occasionally be employed in almost any industry and that lead colors and other lead compounds are often met with in trades under fanciful names.

Absorption of lead occurs through the skin in isolated cases, in the form of vapors and as dust through the respiratory organs.

Industrial lead poisoning appears, as a rule, in the chronic form, and arises from a continuous absorption of the most infinitesimal quantities of lead during a protracted period of time, weeks, months, and even years.

The symptoms are a disturbance of general health, a sense of weakness, decline of bodily health, sallow, pale and yellowish hue of the skin, pain in the region of the stomach, lack of appetite, metallic taste in the mouth, and fetid breath. Lead poisoning may lead to very serious results, such as most obstinate constipation, retention of urine, rheumatism of the joints and paralysis of some of the muscles of the hands and feet. Transient blindness and also a gradual progressive atrophy of the optic nerve, temporary loss of the sense of taste and smell, violent and often fatally ending diseases of the brain.

Lead poisoning is, therefore, quite serious, both as to its fatality and the large number of industries it is used in, but not less so than mercury.

This is used in quite a variety of industries, chief of which are mirror plating, amalgam gilding and silvering, manufacture of barometers, thermometers, incandescent electric lamps, Roentgen rays and Hottorf tubes. Pharmaceutical products, antiseptic dyes, inflammable materials and explosives, the employment of the salts of mercury in the fur business, felt hat manufacture, photography and steel engraving.

Mercury is absorbed through the uninjured skin also in the form of vapor and as dust. The first symptoms are an increased flow of saliva, with swelling of the gums and mucous membrane of the mouth, often accompanied by a formation of ulcers.

Further absorption of the poison leads to digestive disturbances, tremulousness of the fingers, hands, arms, legs, and head. Death may occur in severe cases in consequence of violent tremors and pains affecting the entire body.

Those working in the match factories suffer from phosphorous necrosis of the jaw. This is caused by the inhaling of fumes which arise from the molten mass of the paste into which the match stick is dipped in order to make its head. The fumes from this molten mass enter the decayed teeth of the worker, causing inflammation, suppuration, followed by the loss of the teeth, and, in many cases, it attacks the jaw bone, causing its decay.

DISEASES CAUSED BY DUST.

Dust of various kinds is the cause of a long list of diseases. Government reports indicate the enormous inroads the diseases due to dust are making among various laborers.

Below is given a table of only three of such diseases due to dust. The basis in each case is the ratio of death in every 1,000:

Kind of Dust.	Tuberculosis.	Pneumonia.	Digestive Disease.
Workers in metallic dust....	28.0%	17.4%	17.8%
Workers in mineral dust....	25.2	5.9	16.6
Workers in mixed dust.....	25.6	6.0	15.2
Workers in animal dust.....	20.8	7.7	20.2
Workers in vegetable dust....	13.3	9.4	15.7
Workers on dusty trades....	11.0	4.6	

The percentage for mortality per 1,000 for those occupied in dust producing trades are for those engaged in rags and paper factories, 429; wood-turners, 417; street dust, 419; type foundries and compositors subject to lead dust, 304; cotton weavers, 285; janitors, 250; cotton spinners, 235; silk weavers, 205, and bookbinders, 98.

The metal polisher lives on the average only fifteen years after entering his trade, dying of consumption and other lung diseases. The stone cutter's trade is far more hazardous than that of the soldier, the death rates exceeding 100% every other trade.

Stone quarriers, despite their out-door life, die about twice as fast of consumption as most of the people.

The few facts given which but for the lack of space could be increased tenfold, show how far reaching these industrial diseases are, and how fatal they are to the health and well being of the working class, to say nothing of the economic loss they entail.

Many are the measures that trade unions should enforce in the shops and factories through their organized power, and many are the measures that socialist legislators should enact into the laws of the land that will ameliorate this condition of affairs. It will not remove them; the abolition of capitalism alone will do away with them, but they can be bettered. Of this we shall speak in a future article.

A Suggestion By Dr. M.S. Calman

The renewal of activities on the part of the Harlem, Eastern and Kings County Dental Societies, after the long summer vacation, is no doubt eagerly awaited by the membership.

While the societies are to be congratulated on their past achievements, their work is but begun.

The Societies ought to immediately inaugurate a campaign against Article 9, paragraph 193 of the present dental laws (Public Health Law) relating to the powers conferred on the district dental societies. At present the district dental societies have the power to make all by-laws for the admission of members.

In previous articles printed in the *Progressive Dentist* the writer pointed to the fact that the membership of the present recognized dental societies are mainly well-to-do practitioners, plying their profession among the rich of the community. Is it any wonder then that these district societies take advantage of the power granted to them by law, and thus make the admission of new members to their organization so difficult, that a great number of dentists who are duly authorized to practice dentistry are kept out?

Many of the dentists thus kept out are just as anxious as the members of the district dental societies, to help advance the science of dentistry. Some would make good candidates for nomination to the State Dental Society or to the Board of Dental Examiners. Most or all of them are very anxious to see the present dental laws relating to the illegal practice of dentistry enforced to the full limit, inadequate as these dental laws are at present.

Do you know why this great wrong exists? It exists simply because you are indifferent. A great opportunity presents itself to you. Will you take advantage of it? We shall see.

Here, in Greater New York, a number of dentists (the majority of them) not eligible to membership in the recognized Dental Societies, are organized in three organizations, the Harlem, Eastern, and Kings County Dental Societies. Each organization is active in its own way in carrying out certain activities; all of them having nearly identical interests.

Have you realized what a tremendous amount of work could be accomplished if the three organizations, while maintaining their separate units, would form a federation? Don't you know that in union there is strength and in division weakness? Were we united into one big federation, if we could not have the laws amended with regard to the powers granted the district dental societies in the matter of prescribing the qualifications to membership, we would then demand *equal recognition* with the district dental societies.

Is it not a shame that a man, after complying with all the laws pertaining to the acquisition of the dental degree, is barred from membership to the duly recognized dental societies, because perhaps he has violated some minor clause of the dental code of ethics as adopted by these societies?

This demand is a just one, and I cannot see how a law which discriminates between one legal practitioner and another, a law which holds, that while two persons must conform to certain prescribed rules before they can practice in the State, yet one may have all say, and the other no say in the advancement of the science of dentistry in the State; I say

again, I cannot see how such a law could stand the test before a bar of justice.

It requires but a united front, and victory is ours. Which is the first society to inaugurate such a move? We shall see.

While the demand for equal recognition with the district dental societies is a very important matter, the radical organizations, formed into a federation, would be in a position to carry on an agitation and most likely bring to a realization a great number of reforms that to a single organization may appear of such great magnitude that it abandons them altogether.

"Call Me Not Naomi"

By John Philip Erwin, D. D. S., Perkasio, Pa.

THE SIGNIFICANCE OF NAMES AND TITLES—THE VAGUENESS OF THE TITLE
"DOCTOR"—CONTRAST BETWEEN THE WORK OF THE PHYSICIAN
AND THAT OF THE DENTIST—NEW TITLES SUGGESTED.

"Sticks and stones may break your bones, but names will never hurt you," to be complete should read—"a good name is more to be desired than great riches." A rose by any other name might smell as sweet, but we know a certain surname advances the price to twelve dollars a dozen. William impresses stronger than Jim or Pat, and Kathryn suggests greater dignity than Sal or Liz. Phonograph is preferred to talking machine, and automobile to gas wagon. John D.—is enough to suggest an oil king and J. Pierpont—an American financier. Names may not hurt, but they certainly can help, for the power of a good name is self evident.

It is surprising when one considers the age and history of the dental profession, how few titles, terms and personalities it has created which it can truly call its own. The three greater lights about the altar of human usefulness have each titles by which they are known; technical terms equal to a vocabulary; and prominent personalities dotting every page of history, whereby they are rightfully recognized the leading callings of society. *Reverend (Rev.)* suggests a minister of the gospel, not a butcher; *Honorable (Hon.)* a maker of laws, not a baker; and *Doctor (Dr.)* your family physician, not a candle-stick maker. Each presents a unit in itself, distinct in its work and not confused with any other line of activity. While they may not possess any higher degree of intelligence or skill, produce greater or grander results by their labor or serve society more faithfully, still we all must admit, through some chain of circumstances, they occupy an enviable position not held by dentistry. Their titles have been a factor in producing the success they now enjoy.

The prime purpose of a title is to indicate the class of or position in society to which the bearer belongs and when it fails to clearly do this, it at once drops from its original purpose and becomes a hindrance rather than a help. And so it should be. No confusion attends the employment of the titles, king, prince, duke, colonel, captain or corporal, nor must their wearers explain when announced they are so and so, not this or that, before feeling at ease, because their titles stand for a special class and not a general mass. Has King George ever been called upon to explain that he is not a King but something else? Is Admiral Dewey placed in the uncomfortable position of clearing a mind every time he is greeted by a stranger? Would an American society seeker relinquish a million that his

daughter might be known as Duchess—if the title could be rightfully worn by any other class in society? Therefore, every title to well fulfill its purpose should unconsciously suggest to the mind a complete picture displaying the peculiar type, social position and line of activities of the bearer.

Dentistry, however, continues to employ the title *Doctor* (*Dr.*) confiscated years ago from the medical profession to add prestige to our calling, notwithstanding its continued use creates continual confusion and heaps deserved discredit upon us. Custom, that invisible builder weaving its web of steel as a spider binds a fly, through years of usage has designated *Doctor* to indicate a person engaged in the practice of medicine, and its use by any other class is unjustifiable. *Doctor* has been employed so many years by the public in connection with one to whom we go for relief from physical ills and to whom fear drives us in search of that something to hold the grave away in the great distant, that we never can bring ourselves to associate any other person or profession with it. While it has been employed in the past to represent different vocations, the present and future will only recognize it as representing the medical practitioner.

Through its many years use—or mis-use—dentistry has not approached one step nearer the family heart or attained a position equal to that held by the physician. That our years of labor and service to the human family are thoroughly appreciated is acknowledged, for who would belittle the great achievements as now beheld in modern dentistry. The sensitiveness of the organs we are called upon to treat, and the attendant pain usually associated with our work have formed a barrier between us and our patients which has been a factor in closing the human heart against us. Our present title, however, has and never will overcome it. A new one will be a step in the right direction.

Consider the life work of a physician. With what a warm welcome we receive him in our homes. He it is that greets us at the cradle, hears our first cry, and laughingly launches us out on life's voyage. To him through life we go for balm to our physical wounds, and oftentimes for spiritual solace—for who better ministers to a mind diseased—always looking unto him for the help he so cheerfully gives, until we have suffered the last tinge of pain and breathed our last sigh, again it is our kind, loving, physician who softens our footsteps as we journey over into yon borderland. He is the Alpha and Omega of our existence, for his kindness, his gentleness, and his love reaches from tears to tears; from the cradle to the grave. How fortunate the family that possesses a kind, loving physician. Truly he deserves, as does no other, the enviable position he now occupies.

But how different our work! The sphere of our usefulness is circumscribed. It is largely limited to the controlling of a few black sheep in the dental family, namely, the six year molars and the superior laterals, which, if eliminated, leaves little for us to consider. We seldom treat the inferior six fronts; inferior four bicuspid; the superior cuspids and the twelve year molars as compared to the other teeth. If we control the six year molars in the child, which I grant is a gigantic task, we at once greatly reduce our labors and responsibilities. Pain drives patients to us, while fear keeps them away. The physician comes into close relation with every member of the family, but only the few become professionally acquainted with the dentist.

Many live their lives without a visit to our office, while others rarely require our services. Our calling has never provoked a man to write a poem of merit unless it was the one of Burns' in which he labelled, "— toothache, the hell of all diseases." Surely dentistry is a thing apart—medicine a whole existence.

Because of these differences dentistry should divorce itself forever from the medical profession, giving back the title of *Doctor* and adopting in its stead the new title, *Dentor* abbreviated *Dtr.*

Dentistry is destined to be an independent profession and as such must possess a title clearly indicating those engaged in its practice. Our future is not as medical doctors practicing dentistry nor as a branch of the medical profession, but as a separate unit, a profession independent in itself. For this we need that which makes great characters live forever in history; gives to theology, law, and medicine their peculiar positions and takes an individual out from a mass and places him on a pedestal, namely, *Individuality*. The first step towards supplying the need is the adoption of the suggested title *Dentor*.

Dentistry deserves it. When the profession was young, possessed of limited capabilities and employed by the few, the title *Doctor* was an aid in gaining recognition, but now it has served its purpose, for to-day, with the complete endorsement by all classes of society dentistry is in a position to stand alone. It presents to the world a united profession, supreme in its skill, undivided in principles of practice, and unfaltering in performing the great task of curing the tooth troubles of to-day and preventing those of to-morrow. It not only deserves a name all its own, but is well enough established to demand it.

The new title *Dentor* is significant in that it suggests a person engaged in treating and caring for defective teeth, while the abbreviation *Dtr.* would be quickly comprehended by all. *Dentor White* or *Dtr. Jones* will clearly indicate a dentist while *Doctor Smith* as surely suggests a medical practitioner. Persons hearing you addressed *Dentor* in public places will not awaken you at midnight to treat a child suddenly taken ill, thinking you a medical practitioner. *Stomatologist* or *Orthodontist*, while definite in their meaning to an educated person, signify nothing to the average mind, whereas *Dentor* is different in that the natural logic of an intellect will recognize its relation to a *Dent-ist*. Therein lies its strength. Surely its use will develop for us a pleasing professional personality.

And now, what of our distinct dental words or terms?

The strength of a nation is found in a study of its language. The lower types of civilization express their desires and feelings in grunts, gestures and a few articulated sounds, but as new thoughts and conditions arise, words appear, until a vocabulary is evolved capable of the most beautiful shades of

meaning. The highest state of civilization is accompanied by a beautiful literature made possible by an enlarged vocabulary. From the imp of the isolated isle to the gentleman of golden Greece is a vast span in history, wholly built of words. To measure well a nation your yard stick should be formed of *words* rather than *inches*, for a people are never larger than their vocabulary.

This truth is beautifully exemplified in our present social conditions. The laborer in the ditch with his simple task does not require the language of the expert accountant. Politics the result of reform crusades in the last ten years has given us graft, gold-bug, muckraker, stand patter, big stick, insurgent, progressive bossism, gang, etc., terms read daily in the press and frequently heard from the public platform.

Though possessing a liberal education one cannot read intelligently a medical work unless familiar with numerous technical terms. Many common legal terms are not understood by the laity, while to comprehensively read a theological discourse demands a special vocabulary and a knowledge of Hebrew and Greek.

And what of our technical terms? Were you asked to write one hundred dental terms (excluding medical terms) how would you succeed? Try it. Dentistry now has no name for the dental clinics, hospitals, and wards being established throughout the world as the result of the oral hygiene movement, although the name *Dentatarium* would supply the need and imply the purpose. It would naturally suggest a place where defective teeth are treated and cared for, while dental clinics, dental ward, and dental hospital would not attract attention because of their lack of significance—these latter terms being applied to medical institutions. Bellevue Hospital, Medico-Chirurgical Hospital, and Hahnemann Hospital are names denoting clearly the functions of the institutions.

The Forsyth Dentatarium of Boston would present an entirely different impression and picture than any name now used, make it stand clearly as a particular place devoted to a particular kind of work, and produce for the institution a personality it does not now possess. Rochester Dentatarium would advance the organization to a position where the citizens would soon learn to recognize its sphere of usefulness.

The *Dentatariums*, like the hospitals of our cities, could well bear the name of either their founders or some noted person in the dental profession, whereby honor would be justly bestowed upon the worthy ones and the institutions stand as monuments to the dental profession. Can the reader appreciate the value of *The G. V. Black Dentatarium of Chicago*; *Wheeler Dentatarium of New York*; *Guilford Dentatarium of Philadelphia*, and *Ebersole Dentatarium of Cleveland*, in creating an individuality for such institutions? How long before the press and public would recognize the

dental profession as a powerful factor in the great task of uplifting humanity? What a rare opportunity for someone to write their name with,—"those who love their fellowman."

The spirit of unrest is upon the waters. Dentistry must decide what it intends to stand for. In this twentieth century of marvelous activity and growth the world demands that every man know his proper position and occupy it well. Would not the adoption and use of Dentatarium be a step forward for our profession? Shall we continue the use of *Doctor* as we have in the past, or shall we discard our old dress and proudly proclaim to the world that from henceforth call us not—*Doctor*—call us *Dentor*?

"ORAL HYGIENE."

Physical Defects in School Children

Lucien Saint, Washington correspondent for the *Coming Nation*, in his regular contribution to that magazine, has a section dealing with a government report on the public schools that is startling. When the Socialists get possession of the schools free medical and dental attention will remedy the vast majority of defects that are now sapping the physical life of the oncoming generation. To quote:

"There are 20,000,000 public school children in the United States. That is fine, for the public schools are intrinsically a socialistic apparatus, in spite of the text book trust which tries to throttle free thought in them. Of these 20,000,000 children, an expert in the employ of the Federal Bureau of Education, has learned that not less than 75 per cent. 'need attention to-day for physical defects which are prejudicial to health and which are practically or completely remediable,' but which, he fails to add, are not being remedied because it does not pay to do so. Here is the sad story of capitalism and the children—in cold figures:

"From 1½ to 2 per cent., or 100,000, of these have organic heart disease. Probably 5 per cent., 1,000,000 at least, have now or have had tuberculous disease of the lungs. About 5 per cent., or 1,000,000, have spinal curvature, flat foot, or some other moderate deformity serious enough to interfere to some degree with health. Over 5 per cent., or 1,000,000, have defective hearing. About 25 per cent., or 5,000,000, have defective vision. About 25 per cent., or 5,000,000, are suffering from malnutrition, in many cases due in part at least to one or more of the other defects enumerated. Over 30 per cent., or 6,000,000, have enlarged tonsils, adenoids, or enlarged cervical glands which need attention. Over 50 per cent., or 10,000,000 (in some schools as high as 98 per cent.), have defective teeth which are interfering with health. Several millions of the children possess, each, two or more of the handicapping defects. All the political parties which the capitalistic press denominates as 'great' talk loudly about conservation of 'our natural resources.' Why not conserve the little children?"

. . The Progressive Dentist . . .

PUBLISHED MONTHLY BY THE
DENTISTS' STUDY CHAPTER, I. S. S.

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2141 Third Avenue

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15 East 106th Street

EDITORIAL DEPARTMENT

A great deal is being written and talked about in dental journals and societies at the present time about the reorganization of the N. D. A. Editors write "learned" editorials and "prominent" members of the district societies give talks followed by lengthy discussions on the same topic. To us the whole affair appears comical, were it not so sad.

Reorganize what? The few old reactionary foggies that are responsible for the condition dentistry is in to-day? First open the doors, gentlemen, and let new blood come into your organizations, and then we will reorganize the National Dental Association that it may become truly the representative national organization of the American dentists.

Open the doors wide to all conscientious practitioners whether their signs are three feet or three inches, whether they make gold inlays or gold crowns, so long as they are honest. There are thousands of them, gentlemen, and we will organize the N. D. A. so that it will become a power for the betterment of the practice of dentistry and a deadly foe to the charlatan, the illegal practitioner and the dental "quack."

To the younger members of the district societies we say that if you really desire a powerful dental organization similar to the American Medical Association, that will be in a position to wipe out the widespread illegal practice of our profession and raise the standard of dentistry in general, do away with that part of your code of ethics that prevents you from admitting among your ranks honest practitioners, who must by the nature of the people among whom they practice, have large signs, etc., as a means of getting their patronage.

Should you not, we will start a movement to unite all of the existing dental organizations outside the National, as well as the thousands of unorganized dentists, into a powerful dental organization, take out of your hands the safe keeping of dentistry which was entrusted to you and sweep you into oblivion.

Mourn William Mailly's Death

At the last meeting of the Dentists' Study Chapter of the I. S. S. the following resolution was adopted:

"Whereas, the untimely death of Wm. Mailly has removed from the Socialist movement one of its most devoted and active workers, who by word of mouth and pen was ever ready to lead the working class in its fight for emancipation, and

"Whereas, by his magnificent endowments he was able to give for the cause of Socialism the respect and admiration of all, and

"Whereas, by his splendid devotion to the cause he was an inspiration to all who came in contact with him, be it thereby

"Resolved, That the Dentists' Study Chapter of the I. S. S. mourn the loss of our Comrade and extend our heartfelt sympathy to our Comrade, Bertha Howell Mailly, in her great bereavement.

STUDENTS' DEPARTMENT

All Communications intended for this department should be addressed to: Herman Mendelson, 806 Sixth Ave. New York

Beginning with this issue, the *PROGRESSIVE DENTIST* is attempting to add a new feature to its columns. It wishes to establish a department for dental students. This department shall serve as a medium for the recording of dental college news, I. S. S. chapter activities and for the discussion of all questions of interest to the dental students throughout this country.

We wish to make this department an open forum for and by the dental student. In order to accomplish this, short articles and communications are cordially invited from the student body of all the dental colleges.

Probably not all articles or letters which we shall receive will be fit to print. But, we may as well state at the outset that the shortest, the most impartial and matter-of-fact communications will receive our immediate attention. Also, that they will be published commensurate with the space allotment for this department.

Fellow students, it is high time for the dental student to possess a medium of expression. All colleges, all student bodies possess, more or less, such a medium. Is not our chosen profession of as much importance to ourselves and the community which we intend to serve as any of the other professions practised in this broad land? Shall we not possess an instrument through which to voice our sentiments and ideas pertaining to the cause of dental education?

The columns of this growing dental journal offer us an opportunity for free and untrammelled expression. By all means, let us take advantage of it, and as time will roll by and we will pass out of the students' sphere we shall be able to leave as a legacy to the students following us a real, live, truly representative students' department. And who can tell, it may be the harbinger of benefits which shall be shared by both the future student and professional man.

Fellow students, rally to the support of this department. Let us hear from you.



The Committee on Dental Science and Literature of The Pennsylvania State Dental Society, at the forty-fourth annual meeting, held at Pittsburgh, Pa., on June 11 to 13, 1912, under the heading "New Journals," reported on the *PROGRESSIVE DENTIST* (printed in the October number of *The Dental Cosmos*) as follows:

The Progressive Dentist made its initial appearance in January, 1912. It is a small monthly journal, published by the Dentists' Study Chapter, Intercollegiate Socialist Society, New York city.

LETTERS TO THE EDITOR

DEAR EDITOR:

The Ass sends congratulations. I have just seen the copy of PROGRESSIVE DENTIST and find it truly "progressive," in that it is up to the very moment in its economic attitude.

I appreciate what it means for a publication along any specific side line like this to stand out boldly for Socialism, it takes *nerve* to do that—and the Ass wiggles his ears in joy that there are people who possess this great asset.

I "spoze" dentists can be called a "nervy" bunch anyway, seeing they are extracting nerves from other people all the time.

Joking aside, here's luck to you and long life.

Am tickled to put you on the exchange list.

Yours muchly,

THE ASS HIMSELF.

Headquarters in Kalamazoo,

Hindquarters all over the country.

DEAR EDITOR:

I had the pleasure to read of your Socialist editorial venture in the New York *Call*. I congratulate you for your progressive spirit, and hope that you will have great success, which you certainly deserve. There are too many half-starved dentists who imagine themselves capitalists because they are professionals. Every thinking man, through a little study, will have to come to the conclusion that the present system is a curse to the majority of dentists.

So, you have burdened yourself with a great task and your road will not be a smooth one. For great songs of praise are sung, only, to innovators after they have passed to realms where capitalists are not admitted.

With best wishes, I remain,

Faternally yours,

C. BUTTNER, D.D.S.

404 Bessemer Building,
Pittsburgh, Pa.

Dangers of Decayed Teeth

Many diseases are caused by the septic poisoning which begins in the mouth or at the root of the teeth.

Teeth which are neglected or treated improperly by unskilled or unscrupulous dental operators offer a fertile field for suffering through dental cavities or tooth decay. Poisons generated by defective teeth pass into the human system, and by the slow process of their continued absorption the channel is opened for any and all diseases which are common to mankind.

Why Physicians Should be Socialists

By William Leland Holt, M. D., Friedburg, Germany

[We are printing below an interesting discourse on "Why Physicians Should be Socialists" which should have been termed, "Why Medical Men Should be Socialists," thus including all members of the healing profession. From day to day the benefits a socialist system of society would confer both upon the community and the members of the healing profession, forces itself to the attention of the thinking portion of this profession. We wish the dentists would take a hand in this discussion. The pages of the PROGRESSIVE DENTIST are open to both adherents and opponents of Socialism. —EDITOR.]

Although there is a large organization in the United States called the Christian Fellowship, which publishes the *Christian Socialist*, Socialist physicians seem to be very few. It is natural, to be sure, that more ministers than doctors should espouse the cause of labor, because they are directly concerned with the study of social problems, and the gospel of universal brotherhood and love, which is the spirit of Socialism, is an essential doctrine of the Christian religion.

But is there any valid reason why we physicians should be opposed or even indifferent to the Socialist movement? I believe not. We may naturally be averse to taking a prominent part in Socialist propaganda for fear of losing wealthy patronage; but we are much more independent in this respect than the clergyman, whose salary depends on a few wealthy parishioners. I propose to show that Socialism should appeal to us just as strongly as to the clergy. Indeed, I believe that the chief reason why so few of us have as yet joined the movement is simply ignorance of its true nature. We have no conception of its great significance for our own welfare as a profession, and for the physical and moral welfare of the people. We pride ourselves on being the most altruistic profession; we pride our selves on our disinterested attempts to prevent disease and improve the people's health in every way. Should we not, then, take great interest in a world-wide political movement which will, when successful, make it possible for the first time to realize those ideals of preventive medicine which we have so long cherished but found impossible to attain because of poverty and ignorance?

All the incentives for physicians to become Socialists may be summed up in two, viz: (1) Socialism would greatly benefit themselves, both in body and mind, and (2) Socialism would be of inestimable value to preventive medicine. In the present article I will attempt to establish only the first of these. I wish I could take it for granted that all my readers had a reasonably correct idea of the principles of Socialism; but I know from experience that I cannot.

Hence I must briefly explain the economic and social conditions which would obtain in a co-operative commonwealth. In the first place we should have no rich class owning all or any part of the land, mines, railroads, factories, or other forms of capital or means of production or distribution of wealth; all capital used collectively would be owned collectively by the city, State or nation. This would mean an end to our millionaires and

capitalists, small and large—that is, an end to their private wealth and so to them as a class—and also, I admit, to the big fees that some of our fortunate colleagues occasionally extract from them. But victorious Socialism would not only abolish the millionaire; it would also abolish his victim, the pauper, and the much greater class “on the ragged edge of poverty,” for the socialistic state would give regular work to every able-bodied citizen and pay him the full value of his work. And when you know that the average worker to-day gets back in commodities bought with his wages only 20 per cent to 25 per cent of the value of his product you will see that under Socialism all the working people will get four or five times the income they do at present. The total amount of wealth produced would not be diminished, but rather much increased, because the present great waste of labor due to excessive advertising, to strikes, lockouts, panics and tramps, both rich and poor, would be eliminated. Moreover, the most efficient machinery and methods would be introduced in all industries, and the thousand wastes of competition would be removed. Indeed, Carroll D. Wright has estimated that all the wealth now produced in the United States could be produced in an average working day of five hours if all the sources of waste above mentioned were eliminated. But the most important change would be the more equitable distribution of wealth, that is, of income. Few of us realize that the concentration of wealth in our country has gone on at such a terrific rate during the last generation that at present, according to both Charles B. Spahr* and John Graham Brooks, 125,000 “plutocratic families,” composing less than 1 per cent of our population, own no less than \$33,000,000,000 of wealth, or 54.8 per cent of the total wealth of the United States. Another million and a half families in “the well-to-do class” own about \$20,000,000,000, or one-third of the total wealth, leaving for the 15,000,000 American families of the “middle and poor classes,” that is, the working class, the handsome sum of \$8,000,000,000 or \$9,000,000,000, amounting to but 12 per cent, or one-eighth of the total national wealth. The contrast is made plainer when one compares the average wealth of the 125,000 plutocratic families with the average wealth of the 15,000,000 working class families; the figures are respectively \$264,000 and \$825, making a ratio of 1 to 320. A single individual, Mr. Rockefeller, is estimated to have an income of no less than \$50,000,000, equal to that received by 100,000 families in the working class at \$500 apiece!

Is it not evident that if these huge fortunes were distributed, or rather the huge incomes now derived from them, among the 15,000,000 families who form nine-tenths of our patients, that we should gain much by getting fair pay for all our work than we should lose from the occasional big fee? Then every citizen would be able to pay his physician. Or more likely the State would pay us according to the amount and quality of work we did. The fundamental idea of Socialism is not “equal incomes,” as ignorant critics often declare, but as Abraham Lincoln said long ago, “to secure to each laborer the whole product of his labor, or as nearly as possible,” which, he added, “is a worthy object of any good government.”

So much for an outline of what Socialism means and our economic position under it. Besides the assurance of a comfortable income we should get free insurance from the government against accident, illness and old age. We could work with light hearts, free from that haunting fear of

being incapacitated and plunged into poverty by accident or illness, or dying and leaving a family with only a few thousand dollars of life insurance to stave off poverty for a few years.

"All very well," some objector may say, "but if you abolish the rich, who is going to build such fine hospitals as our millionaires have given us?" The same workingmen. I answer, who have built all the hospitals we now have; for no millionaire ever built a hospital, or anything else, unless one calls his accumulation of wealth taken from the workers by the euphemistic name of "building a fortune." Our millionaires have only ordered workingmen to build hospitals, and paid them a fraction of the true value of their labor out of the great wealth already taken from these same workers and their fellow workers. A Socialist State would be vastly wealthier than even our Rockefellers and Carnegies, for it would possess the entire capital of the nation except such "personal capital" as private houses, tools, or physicians' instruments. Hospitals would be built by a national or municipal Department of Health composed of physicians and engineers, who we may be sure would erect quite as good buildings as our millionaires have ordered. Indeed at present the largest and best equipped hospital in Boston is a municipal one, the Boston City Hospital.

Another boon promised by Socialism is delivery from the injurious and humiliating competition of "quacks" and patent medicines. For a socialistic government would undoubtedly nationalize the practice of medicine like every other profession; a strong Federal Department of Health would establish a high uniform standard for medical education and uniform examinations for a national license. This was done long ago in Germany and other European countries. Moreover, medical service would probably be made free, just as the protection afforded by the army and navy, the police and fire departments is at present, the individual citizen paying his share of their support in the form of taxation. And when the people could get first class medical service free, no one would go to quacks, and these gentry would die a natural death.

Patent medicines are, of course, made solely for private profit, and their manufacture or sale would be absolutely prohibited, just as the making of private money or of postage stamps is at present. When people could get doctors' prescriptions for nothing and drugs made in the national factories at cost, our patent medicine vendors could not sell their inferior goods to an enlightened public at a profit in any case. Indeed, some economist has shown that when a nation goes into any business, such as carrying the mail, no private corporation can successfully compete with it. Just remember the estimate made by Samuel Hopkins Adams that the American people were spending \$100,000,000 a year on patent medicines; then think how much more income and practice we should get if all those people came to us instead!

So much for the material advantages that Socialism would bring us. The reproach is often brought against Socialists that they are "sordid materialists," caring only to fill the stomachs of the people and ignoring the spiritual side of life. I wish to show how completely false this charge is, that Socialism would not improve spiritual as well as material conditions, by outlining the spiritual effect which Socialism would have on the ethical relations in the medical profession. What is the chief cause of the jealousies and unfriendliness which so often exist among us but competition?—the fact that there is not enough practice for all of us to make a good income;

and each of us feels that he must get all the practice he can, whether his less fortunate colleague fails to get enough to support his family or not. And can the unsuccessful physician who sees his rivals get more practice than they can alone take proper care of, and much more than they need for a good living, while he cannot get enough to make both ends meet, chiefly because he cannot afford a well situated and well appointed office and has no influential, rich friends—can such a man, if human, help being jealous of his successful rivals? Do we realize how subtly but surely this eternal economic warfare poisons the friendship which would naturally exist between us? Is it not competition, and the enmity which it so often generates, which tempts some of us to take unfair advantages, just as it tempted Rockefeller and is tempting tradesmen now every day, in order to defeat our competitors and save ourselves from defeat? Competition tempts the tradesman to lie about his goods in his advertisements; it tempts the manufacturer to reduce his employees' wages and adulterate his goods; it tempts the lawyer to defend any scoundrel or any crime for a fee; it tempts the clergyman to advertise sensational sermons, to defend the anti-social business methods of his rich parishioners, to betray his duty of preaching social justice, and it tempts us physicians to advertise, to cut rates, to flatter the rich, to seek political favor and influence and worst of all to attack or disparage the work and reputation of our competitors.

Now this is an axiom of scientific medicine: To cure a disease, first remove the cause. Does it not follow, then, that the best way to cure this moral disease, the jealousies, enmities and breaches of ethics in our profession is to remove their chief cause, the brutal struggle for a living? Can any one of us doubt that if we all were assured a comfortable living from the Federal or State Government, so long as we did satisfactory work, and if our income and reputation did not at all depend upon our social connections, or private wealth, but solely upon our own ability and industry, that most of the jealousy and enmity among us would die out, and we should soon acquire the spirit of comradeship and brotherhood which should unite all the members of our noble profession?

I should like to mention just one more advantage which Socialism would bring us: opportunity to specialize. It is one of the drawbacks of our present competitive system that it prevents most of us from specializing and doing that work which we can do best and enjoy most, for with few exceptions every one enjoys that work most which he does best. Most of us in the cities and all of us in the small towns feel that we must "take everything that comes" to make the two ends meet: we can no more afford to specialize than we can afford all the latest medical books or a \$3,000 automobile or a postgraduate course in Germany. Hence we often treat difficult cases that we know a specialist could treat better. Of course in theory it would be possible now under the present system for all the doctors in every city to specialize, dividing up the various specialties among them according to individual ability and preference and the popular demand. But practically under our present competitive stress I doubt greatly whether any city could be found where each doctor would agree to take only one sort of cases and refer all others outside his specialty to one of his competitors. In the present half-organized state of the profession with the clash between the regulars, the homeopaths, and the osteopaths, any such plan is clearly out of the question. Under Socialism, however, the whole medical profession would soon be completely and scientifically organized,

somewhat as the army and navy are now. Indeed a physician recently advocated in the *Critic and Guide* nationalism of the profession and medical education after the pattern of West Point and of army appointments. And in such case there is no reasonable doubt that all physicians would be trained and appointed for some special work. We should obtain the same scientific division of labor in medicine that we have long had in our great industries. Would there be any comparison in the efficiency of service rendered to a community by ten physicians, each a master in one large branch of medicine, with that rendered by ten "physicians of the old school," who know a little of everything, but are masters of nothing? Even small towns of 4,000 or 5,000 could have the advantage of this system of specialists, for example, as follows: (1) For the eye and ear; (2) for the nose, throat and lungs; (3) general internal medicine; (4) obstetrics and gynecology; (5) pediatrics; (6) general surgery; (7) the skin and venereal diseases; (8) school physician and teacher of hygiene and physiology; (9) health officer, and (10) general pathologist and milk commissioner.

Why Physicians should not be Socialists

By James J. Walsh, M. D., New York

Dean of Fordham University Medical School.

There is just one reason why physicians should not be Socialists, and that is because Socialism is a revolutionary system. We all know and feel that social reform is sadly needed. Social revolution is quite another thing. A large number of people just now are coquetting with Socialism who apparently do not understand at all its true significance. Prominent Socialists, recognized as such by members of the party, are on record declaring patriotism a foolish notion by which the wealthy get the poor to fight for the rights of the property owners, while supposedly fighting for their country, proclaiming Christianity a system of thought by which the poor are made subservient to the wealthy, and deriding the marriage relation as a bond and badge of servitude. If physicians are willing to go this far then let them become Socialists.

But does not Socialism represent the best means of securing social reform? Prominent Socialists are on record repudiating the idea of social reform so long as the present social conditions continue. They want to revolutionize our social system in order to bring in social reform. With the gradual social reform under our present system they have no sympathy. This has been abundantly shown by their own writers.

But has not the socialistic movement brought great improvements in social conditions? The improvement in the conditions of the laboring classes which began about a century ago have continued progressively since. Socialism began to make itself felt in a very mild way only half a century ago and until the last twenty years had very little influence either on general thought or in politics.

In the meantime it must not be forgotten that centuries ago a magnificent development of social conditions was witnessed, when M. Urbain Gohier, the French Socialist, was in this country some years ago he called attention to the fact that the workmen of the Middle Ages had secured "the three eights," eight hours of work, eight hours of sleep and eight hours for recreation and the necessities of the body. He also added that they had secured the Saturday half holiday in all trades and he might have added

that there was a full holiday oftener than once every two weeks because the Church holy days, over thirty in number annually, required abstention from work.

Socialism is a system of thought and of government that would remake the world, but remake it out of its present imperfect elements. If men were perfect, if they would all work to the top of their bent without special prizes and the spur of ambition, if sex relations could be managed and children raised without disturbance under a system of free love, if religion meant nothing to men and patriotism were an idle dream, then Socialism might well be successful.

In the meantime it might be well to call to attention the fact that Dr. Holt is all wrong, though not more wrong than Socialists usually are, in his statistics with regard to the distribution of wealth. He says, for instance, that "the middle and poor classes own one-eighth of the total national wealth." There are no statistics that justify that assertion. The magazine, the *Common Cause*, has an article in February (continued in March), that utterly contradicts all such socialistic claims. We know from the United States Agricultural Department that one-fourth of all the wealth of the nation is represented by farm lands that belong to farmers. How much more they have in railroad stocks and bonds, on deposit in banks and in mortgages and all sorts of securities we have no means of knowing. There are those who say that owing to recent prosperity 40 per cent. of the wealth of the country is in the hands of the farmers.

Such misrepresentations of social conditions are constantly made so as to increase social disquiet. This is the purpose of the Socialist openly avowed. He is for social revolution, not the reform of present conditions unless by means of the revolution which he is planning. There are many short-sighted people who think of themselves as Socialists but do not realize this. Let every physician do all that he can to help social reform, but let us beware of sugar-coated social revolution.

Socialism at Michigan University

"Hail to the students who are including humanity among the humanities," was the greeting that William Dean Howells gave to the second annual convention of the Intercollegiate Socialist Society, at which 325 men and women were present, representing seventy colleges, among them Michigan, which is officially stated to be the strongest in the league.

No Socialist organization was in existence or even dreamed of in the university until 1907, but when in that year six Michigan students drank from a loving cup at a midnight feed, and pledged themselves "round and round" to Socialism, it was like the leaven which the woman hid in three measures of meal, till the whole lump became leavened. This nucleus of Socialism in the university has acquired bone and sinew, and has achieved a strength which is virile and victorious among contemporary campus organizations.

This little society of six met very unofficially and irregularly, with a purpose nothing more than to find opportunity to discuss present day social problems, unhampered by class-room restrictions. Socialism entered into these discussions only as an academic question, but it entered, and the force

of it has permeated through college and town, until the Intercollegiate Socialist Society, locally represented, is a living factor in Ann Arbor and is officially announced as the strongest organization in the intercollegiate league.

And the Intercollegiate Socialist Society is a factor that is being reckoned with, for its growth has realized assertive rights, and it is aggressive sometimes almost beyond faculty restraint, and in instances has defied faculty caution, and individual members have paid the penalty for "free speech" by compulsory resignation from the university, which could not tolerate the views.

SOME PROFESSORS IN.

The faculty as a faculty does not give to this avowed group of Socialists its moral support. The organization is an alien to faculty kinship, although a few professors wink at it, and a smaller number brazenly affiliate with it, laughing at the sovereign edict that free speech in colleges shall not be.

The Intercollegiate Socialist Society was organized in New York City on September 12, 1905, in response to a call issued by a group of well known writers, including Jack London, Upton Sinclair, Thomas Wentworth Higginson, J. G. Phelps Stokes, Charlotte Perkins Gilman, Clarence Darrow and others, who felt that the subject of Socialism was one concerning which the educated men and women of the country could not afford to remain in ignorance. The expressed purpose, therefore, was "to promote an intelligent interest in Socialism among college men and women," graduate and undergraduate. This was to be accomplished chiefly through the formation of study clubs in colleges and universities and alumni chapters among graduates, the distribution of literature and through lectures and discussions.

In 1908-1909 the increased activity of the initial six at Michigan brought increased membership and preparations were made to apply for a charter from the national organization. This was granted, and in 1909-1910 the organization was launched formally. Larger activities gave increase of meetings and the society became substantial and promising. The very active members were Marie Rasey, William Klare, J. B. Beekenstein, Peter Fagan, Claire Tinker. The faculty member who was the inspiration of the movement was Dr. William E. Bohn.

(From Detroit Free Press.)

(To be Continued in the November Issue)

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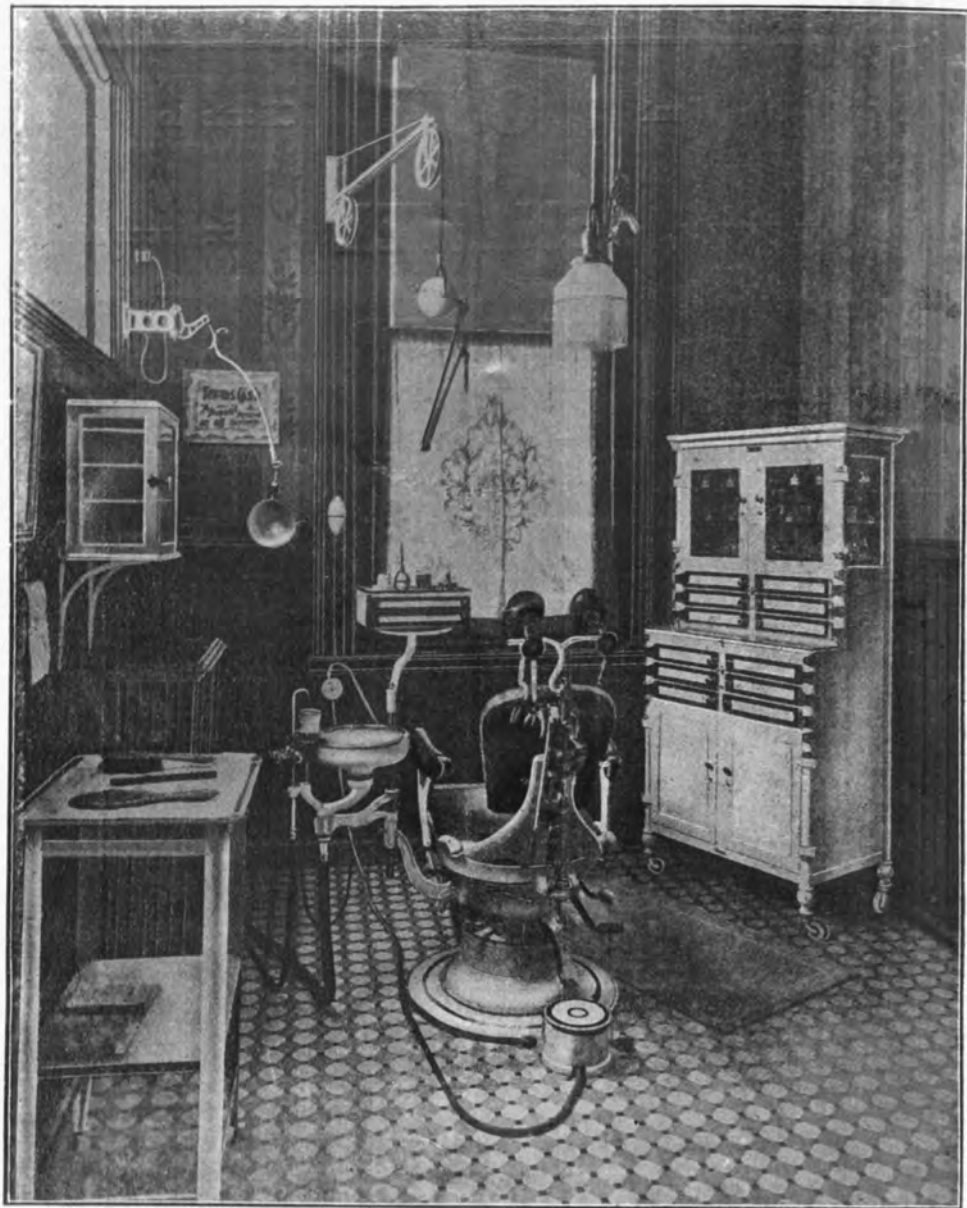
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THE RAFKIN GOLD-SHELL CROWN

By Dr. Maurice M. Rafkin

Considerable discussion has been going on for the past few years as to the best way of obtaining a perfect gold shell crown. Several methods have been devised but none, to my mind, are perfect, I have therefore devised a method by which I believe the best results can be obtained.

This method permits a perfect adaptation, contour and articulation, while at the same time possesses the strength that is required.

A gold shell crown should not be made for a tooth anterior to the bicuspid. I will therefore describe the steps to be taken in the making of a gold shell crown on a bicuspid or molar.

But before describing my crown, I want to touch on some of the faults of the shell crowns in use.

The (ordinary) Seamless Crown

(1) The seamless crown is never made to fit the tooth, but the tooth is ground down to fit the crown, and the perfect fit required is impossible.

(2) A seamless crown is always stretched in fitting it over the tooth because of the pliability and thinness of the shell, and therefore there is always a space at the neck between the crown and the tooth.

(3) The shell is very often cracked at the gingival margin, without the operator knowing it. This fault is recognized only when the patient comes back with a loose crown or bridge underneath which the teeth are found to be badly decayed.

(4) When a seamless crown is to be used as an abutment for a bridge, in taking the impression or bite when the crown is in position, it may be moved in any direction, and thus a wrong articulation is obtained in many cases.

The Two-Piece Crown

Some dentists consider the two piece crown a better fitting one than the one previously described and it surely is but it has its faults.

(1) It has not a perfect fit, contour, contact point and strength.

(2) It discolours at the seams, after it is in the mouth for some time.

(3) Is weak at the points where soldered.

(4) This crown also does not fit at the neck as required.

The Cast Crown

The cast crown which is considered the best to date by some members of the profession has its faults.

(1) That part of the platinum band which goes under the gingival margin, and being of a very thin gauge, often curls up after the crown has been cast and when fitting it to the tooth.

(2) It is difficult to burnish the platinum band around the neck of the tooth, and if not perfectly burnished it will leave a space for food to deposit and cause the gum tissue to recede and finally a loosening of the tooth takes place.

(3) This crown is very objectionable in case of trouble with the tooth on account of the difficulty encountered in trying to remove or perforate it when entrance is required into the tooth.

(4) The carving of this crown requires an expert. Otherwise it is artificial and poor in contact points after it is cast, ground and polished.

The Raffin Crown

The following method I use in making my crown:

After the tooth has been devitalized a bite and impression are taken of the tooth. This is poured and articulated upon a small bridge articulator. The plaster tooth in question is built out in wax to its proper articulation, contour and general form. This plaster tooth is sandpapered mesially and distally. A plaster mould is then made, S. S. White Mellottes metal is poured into it to obtain a die. A gold shell is then swedged over it. The Mellotes metal is boiled out of the gold shell in boiling water. The crown thus swedged is a perfect reproduction of the tooth when it was in good condition.

The tooth is then ground down in the mouth making the walls parallel and without the cusps. It is then grooved mesially and distally at the morsal surface. A wire measure is then taken with the dentimeter. A gold or platinum band of 36 gauge is then made, soldered and fitted to the tooth in the mouth, and the band burnished into the grooves of the morsal surface of the tooth. These grooves on the band are then filled in with 22 karat solder. The projections thus resulting and which fit perfectly into the grooves on the morsal surface prevent any movement of the band upon the tooth.

An impression and bite are then taken with the band in position. This is poured and articulated as before described. The gold shell crown is then trimmed and adjusted over the plaster tooth with the gold or platinum band on, just as it is desired to have it fit over the tooth in the mouth.

The crown, in placing it over the band on the plaster model, fits up to the gingival margin. The plaster covering that part of the gold or platinum band which is to go slightly under the free margin of the gum, is cut away, and the exposed portion of the band is then waxed together with the crown. The two are then cut out from the model and invested, exposing the waxed portion only. This is then soldered with 22 karat solder.

By this a very strong and knife-edge crown is obtained. This knife edge being very smooth, of an even bevel and snugly fitting at the neck portion of the tooth, need be made to go no further than a 32nd of an inch under the free margin of the gum. Such a crown does not irritate the gum as do all other crowns.

The crown is then polished and fitted in the mouth in the ordinary manner. In cases of large pieces of bridge work the space between the band and the shell should be filled in with solder.

This crown can be removed from the tooth after it is cemented on as easily as any ordinary gold shell crown, or it can be drilled through at the morsal surface in case of any trouble that may arise with the tooth after the crown has been on for some time. The cusp portion of the crown, by the way, should always contain solder.

This method may seem rather lengthy in description but it is not when actually worked out. The real advantage of this crown over any of the others can only be fully appreciated after it has been tried.



PERSONAL IDENTITY

By Dr. Paul Sigmund Tarler

The Fool: "Oh Seer, I pray thee, who am I?"

The Seer: "Verily thou art the Fool."

The Fool: "If perchance thy wisdom covered me as with a cloak, wouldst still know me?"

The Seer: "Yea, I would penetrate thy disguise and know thee for what thou art; a fool."

* * *

In trying criminal cases and very often in civil ones, the establishing of the identity of a person is sometimes of the utmost importance. It may be the living person whose identity must be proved or the absolute identification of the corpse or even parts of a corpse.

The subject of identification is quite a large one in Legal Medicine but the little space allotted here, compels me to treat only of that phase of it which is of interest to the dental surgeon: namely, identification by means of the teeth.

When called upon to establish the identity or non-identity of a corpse, the dentist of the deceased person has many means by which he can reach his conclusions. For instance; the condition of the alveolar process; the presence or loss of teeth; presence of plates or bridge-work or the markings which these artificial substitutes have left; also fillings and irregularities in the arrangement of the teeth. If the practitioner has records, (and by the way, every dentist should keep them), or models to substantiate his opinions of the body's identity, well and good; but if no such proofs are available he should be very discreet and cautious in presenting his evidence before the court.

The strength of the dentist's opinion depends on the length of time that has elapsed between the last examination of the supposed patient and his death. The greater the length of time, the weaker the testimony, for conditions within the mouth change in course of time. Teeth extracted cause changes in the alveolar process and gums. It follows therefore that the witness should proceed with caution, especially when public clamor and passion is so great sometimes in its demands for a victim as to twist the facts.

An old and very interesting case illustrating the importance of dental testimony in identification is that of Elizabeth Ross, who was tried at the Old Bailey in London in 1831 for the murder of Caroline Walsh.

The son of the prisoner swore that his mother had suffocated the missing woman. He saw her body in the cellar and the next day his mother left the house with a sack. It was just at a period when murders were being committed to supply anatomical material for the medical schools of London.

Due to some peculiar coincidents, the next evening after the supposed disappearance of Caroline Walsh, a woman in a very filthy and ragged state was found lying in the street in the neighborhood of the home of the accused. She declared her name to be Caroline Walsh. On account of a fractured hip, she was conveyed to the London Hospital where she died.

At the trial in December the prisoner insisted that this woman was the one she was accused of having murdered and in the face of her son's evidence it was now essential, in order that justice be done, to prove absolutely the identity or non-identity of the two women. Was Caroline Walsh who had disappeared the Caroline Walsh who had died in the London Hospital?

The names of the two women were alike. The spot where the woman was picked up was in the vicinity of the home where the missing one boarded. The dresses described by the acquaintances of both were almost alike. One was known to have had in her possession a certain basket, so was the other. The prisoner was certain of acquittal.

The body of the female who had died in the hospital was exhumed and viewed by the two grand-daughters of the missing C. W. They both swore that it was not the body of their grandmother. A medical examination showed an entire obliteration of the alveolar process, proving loss of the teeth long before death, whereas witnesses testified that the missing C. W., though 84 years of age had healthy incisors of striking peculiarity. Had putrefaction set in causing entire loss of the features, this fact would still stand out prominently.

It was proven beyond a reasonable doubt that the missing C. W. was not the C. W. who had died in the hospital and Elizabeth Ross paid the penalty of her crime on the gallows.



Mayor Gaynor has appointed Dr. Ira S. Wile a member of the Board of Education. Dr. Wile is in the children's department of the Vanderbilt Clinic and is the editor of the Medical Review of Reviews and of the department of surgical sociology of the American Journal of Surgery.

To him Mayor Gaynor wrote: "I am appointing you a member of the Board of Education. My object in doing so is to have you enter systematically into the work of examining into the health of the children in the public schools and taking a scientific means of prevention and cure. Among other things the eyes, ears and teeth of the children should be carefully looked into. It is almost impossible to have a healthy body without good teeth."

::—:: REFLECTIONS ::—::

By Dr. L. E. Evslin.

Many a molar could be saved if the poor patient would be richer and could afford to pay for the threatment of same.

* * *

As things are, it is better for the dentist to have the offending molar removed, the adjacent teeth crowned and a bridge constructed in a hurry. Of course, this course of proceeding is not the very best for the patient, but the poor dentist needs the money. Who said that the patient's and the practitioner's interests are in harmony in our wonderful society?

A little less crowning and a good deal more filling would in all probability save more teeth and save them for a longer period of time, but the most the poor dentist can charge his poor patient for a filling would be \$2.00, while he can charge \$5.00 for a crown.

The fact that the crown demands more time is not essential, first, because these sort of crowns are turned out like hot cakes; second, time with the poor dentist does not count, since his working day is somewhere between fifteen and twenty hours per day. How about striking for an eight hour day? The average dentist's day is long, his work indoors and unhygienic in the extreme. Most of them, after life-long hard labor, die poor men and yet they consider themselves superior to the working class.

* * *

Let the title "Doctor" to your name not mislead you; you are a member of the present society, and as such suffer its wrongs as well as every body else. Get in line, study the present conditions and get into the fight for the right cause.

* * *

It is curious to see the oracles of our profession, discuss in their papers on the oral hygiene question, where they are forced to consider cause and effect, and unwillingly touch upon the economic side of the question. They walk around and around the question for fear they may touch on the dangerous social side of it, which may bring them, to very dangerous conclusions. Courage gentlemen, courage!

* * *

In the first place, you cannot be scientific in your discussions on questions of public health without considering, at the same time, the underlying causes of disease which are social causes; in the second place, do not fear that you will lose your rich clientele because you have convinced yourselves of the social wrongs of our present society. Many intellectually bigger men than you are, also dependent upon the good graces of the rich, have affiliated themselves with the radical movement for social progress when they wished to remain scientific and truthful.

Different teeth in the same mouth will behave differently, although treated under the same conditions. In one case the pulp will die promptly, and its neighbor, with the same arsenious application, will cause excruciating pain. In one tooth the canal can be filled and the operation completed promptly, while its neighbor will suddenly and without any apparent cause, get cranky with periostitis.

* * *

Every school ought to have a dental clinic, and the work supervised by a special Dental Committee which should work in conjunction with the Education Department. The future generations are the future life and wealth of a nation or country. Seventy-five percent of the children are of poor parentage today. If the state were really wise, it would invest in this growing wealth. Wealthy children would make so much more productive working capital. Why should the state take less interest in poor children's teeth, for instance, than the teeth of the sailors and soldiers? Surely there would be less work for the Navy and the Army dentists if the children's teeth were taken care of during school time.

* * *

It is surprising how intelligent men will not try to figure out the reason for the degrading poverty on one hand, and the tremendous wealth accumulating in the hands of a few on the other.



DENTAL CLINICS IN PUBLIC SCHOOLS

1. The introduction of dental service into public schools can only be accomplished by the personal efforts of dentists, seconded by educators and physicians.

2. Secure the good will of your state, county and city superintendent, and, above all, enlist the cooperation of the President and board of education.

3. Interest them in the subject of dental clinics in public schools.

4. Gain permission from the county, city and local superintendents to present the subject of the dental clinics to the board of education.

5. Address the board of education in the brightest and most plausible manner possible. Talk English! Cram your mind with facts, figures and logic!

6. Explain that dental caries attacks about 90 per cent, of the teeth of children between the age of six and fifteen years.

7. Mention that the bacilli of tuberculosis, cancer, syphilis, tetanus, septicemia, spinal meningitis, pneumonia, diphtheria, scarlet fever and other deadly diseases may infect the child through the mouth and teeth.

8. Describe how defective teeth produce reflex nerve irritation, resulting in obscure and excruciating cases of neuralgia which unfit the pupil for study.

9. Records prove that pupils possessing defective teeth require nine months more of study each, on an average, to graduate from public schools than scholars with sound teeth.

10. The amount of suffering directly and indirectly caused by neglected teeth of school children is beyond computation.

11. Conclusion: Therefore, regard for mitigating human ills as well as economic considerations should impel school authorities to bestow needed attention upon the teeth of pupils. This attention can best be given by establishing free dental clinics for school children.

12. After reaching a satisfactory agreement with the proper authorities, make the personal examinations of pupils' teeth in a systematic manner at the time appointed, using blanks properly prepared for that purpose.

13. Send a copy of the results of the examination to the parent.

14. In a genial but forcible manner urge the necessity for cleansing the teeth daily with a toothbrush and powder.

15. Call attention to the necessity for periodical and systematic oral examinations.

16. If the pupil has no dentist, do the work in the dental clinic established for the public school.

17. Use your common sense and knowledge of human nature in working out details.

New York City could save between "three and four million dollars each year" on school appropriations if it were not for "laggards." Some of the loss comes from defective mentality", but 90 per cent, of it comes from defective physical condition. Henry C. Jenkins, principal of the largest public school in the world, says, after examining the teeth of the pupils in his school: "Eighty per cent. of those pupils examined had no other defect whatever except defective teeth."

Alphonso Irwin, D. D. S.

Chairman N. J. State Dental Society Committee on Free Dental Clinics to work in conjunction with the State Board of Education.

— The Dental Scrap-Book.

THE NOTORIOUS REV. HILL.

The minister of a high class society church, who is commonly known as a professional soul grafter and many times branded as a hypocrite, has the gall to join hand in hand with the other humble servant of capitalism, Father John L. Bedford in saying that Socialists should be shot or electrocuted.

In view of Mr. Hill's past life and present occupation no one can really expect any thing different from him. He is a product of the class he represents and he represents it well. He is the speaking tube of the parasites of society, the very class that find no room in real religion and against which Christianity in its childhood was a weapon.

To give too much attention to Mr. Hill would be a waste of time. He has been analyzed by the general public long ago. He is the kind of a gentleman absolutely necessary in order that the Kingdom of Mammon with its exploitation, graft and extortion may flourish and the kind of a gentleman who prayed for Taft at the Convention in Chicago.

Mr. Hill is right in place well fitted for the position of playing an underhanded game with the ethics of Christianity and Religion.

The Progressive Dentist

PUBLISHED MONTHLY BY THE

NEW YORK DENTISTS' CHAPTER

Intercollegiate Socialist Society

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Telephone Harlem 952

Subscription price 50 cents a year

EDITORIAL DEPARTMENT

A splendid article by Dr. Warbasse, which appears also in this issue of the Progressive Dentist, exposes in an unmistakable manner among other things, how economic conditions deprive the average medical practitioner of the possibility to avail himself of all modern appliances which science and discovery enables him to call to his aid.

No less is the dentist held down by economic conditions. The X-Ray apparatus for an instance, which is so essential to successful dental treatment remains only an ideal in the mind of the average dentist, and thus the overwhelming number of patients patronizing dentists are excluded from the blessings made possible by that instrument.

Dr. Warbasse, who in this respect is in the same line of thought with many leading medical authorities, recommends that the physician be engaged by the state as its medical servant.

This magazine since its establishment has advocated this method with regard to dentistry. Claiming, that the dentist being assured a fair remuneration, would have no other purpose in his practice than to serve all those who come under his care to the best of his ability and according to latest known methods. Equipments would be provided by the state and medicine and dentistry would be practiced only in fully equipped offices. Incidentally, such acquisition by the state of the dentists' services would naturally eliminate all dental parlor methods and the illegal practice of dentistry.

However this method of practice may be far off and we should endeavor to ameliorate conditions as much as possible at the present. A thorough understanding among the great mass of dentists, if such changes are desired, is therefore self evident.

One of the most important steps to be taken is to wipe out all illegal practitioners. Not because they curtail profits of the legalized dental fraternity but because they deal out the worst kind of quackery. And in no few cases put the legal practitioner at the mercy of competing for his fee with that set by the illegal practitioner which leads to inferior service even at the hands of a licensed dentist.

We call upon every licensed dentist to join the dental society in his district and there agitate for a united dental profession. This can have no other effect than bring forth innumerable blessings for the profession and the public.

L. R., D. D. S.

STUDENTS' DEPARTMENT

All Communications intended for this department should be addressed to:

Herman Mendelson, 806 Sixth Ave., New York

STUDENTS, AND STUDENTS

They are all professional students — all of this buzzing, shouting, excited crowd of young men. They have just come out of the lecture-hall where their minds have been tortured by cruel men for a time that seemed never to end. But these are determined fellows. Failure to "know" the subjects spells many, many extremely inconvenient things for all of them and want and grinding struggle to most of them. They go home, then, deggedly determined to study and "know" everything given to them. They drill, cram and grind until the strange terrifying studies are somehow tucked away in the memory whence they are made to appear and perform stunts at the proper time and place.

Almost every one of us students study that way. We go along committing to memory things as they are given to us verbatim. And when we succeed in doing that, we sigh a deep sigh of relief and are satisfied. No spirit of inquiry, no original questioning, no looking into matters on our own account, no investigating. The most unsettled questions of science are taken up and "studied" as established facts. The problems that are still baffling the most searching masterminds as well as those mysteries that will probably forever challenge human understanding, are either ignored or, - which is worse - made to remember along with other matter as settled, undisputed facts.

The professor explains the Atomic theory. Although he does not forget to emphasize the fact that this is only theory, and that new theories have lately been advanced more rational and more probable, we jot it down into our note-books very faithfully, memorize, and rush to the next subject.

Brown and Smith are both students studying histology in the same class. To Brown the microscope is daily revealing wonderful things. He watches the tiny organisms with deep delight and wonderment. He sees in the little cell the eternal riddle of life; the great, perplexing mysteries that mark the borderland of the Unknown. He sees the silent workings of nature and contemplates on that cosmic omnipresent Intelligence that provides an amoeba with powers of locomotion, food-assimilation, and reproduction. But, alas for poor Brown. While being absorbed in all these thoughts he forgets to learn of the difference between "cytoplasm", "spongioplasm", "hyaloplasm" etc. And when the examination day comes Brown fails to pass.

Smith, on the other hand, is a practical fellow who knows what he wants and goes for it. He at once begins cutting up the histology into "important" and "unimportant" parts. Needless to say that practical Smith studies only the "important" parts, and later finds the examination exceedingly easy.

Yet, under existing conditions I do not see how we can study and complete our professional career in any other way. There is absolutely no room, no time for original research, not even sufficient time to mentally digest what others have found out for us. Failure of passing an examination means too much to allow of "taking chances". The dread of failing is ever-present and haunts us in our dreams. And the surest way of passing and get rid of all this annoying business, is to memorize and be able afterwards to repeat automaton-like all subjects.

What sort of professionals will such students make?

David Tabak, 14 N. Y. C. D.



BOOK REVIEWS

Dental Laws Condensed. A brief guide to the Requirements of Dental Examiners from Applicants for a license to practice Dentistry in the United States of America and Island Possessions Canada and the Provinces, also the leading civilized Countries throughout the World. Library Edition, quarter Morocco \$1.50 net. By Alphonso Irwin, D. D. S. Camden, N. J. 1912.

Dr. Irwin has rendered the dental profession a great service by compiling this book. While he does not claim that the information is complete or perfect, it must be admitted nevertheless that it is the first attempt to compile and place before the profession the requirements of the various state boards of this country and abroad.

The requirements will no doubt change from time to time which will require revised editions of this work. As it stands to day it is up-to-date at the present time and it will be of great value to students contemplating taking various state board exams and to practitioners who desire to change their place of practice.

All students and members of the profession ought to encourage Dr. Irwin in his work by purchasing a copy of his book.

LETTERS TO THE EDITOR

Dear Editor:—

I have just received two copies of the October number of the Progressive Dentist which you so kindly sent me, and for which I thank you. I am certain that I shall find the magazine interesting especially your article on "Occupational Diseases".

With kind regards, I am,

Fraternally yours

S. John Block
attorney at law.

* * *

Dear Editor:—

I accidentally came across a copy of the Progressive Dentist, today, and was delighted to know that such a publication (its sphere of action considered) was in existence.

If you can send me a few sample copies, I will distribute them at my college.

Yours for progress
P. S. Haley Ph. G., D. S.

San Francisco, Cal.

* * *

Dear Editor:—

I notice in the Chicago World that you are publishing a dental magazine in the interest of socialism.

There are in this state a large number of dentists who are interested in socialism and who would undoubtedly subscribe if they knew about this magazine. You might as well reach as large a number of dentists as possible, and I would suggest that you run a three line advertisement in one or more of the leading dental magazines, and I believe that you will make more than enough to pay the cost besides extending your influence.

Fraternally

Dr. C. B. Warner,
Urbana, Ill.

Chairman Publicity Committee of
National Dental Association.

* * *

Dear Editor:—

I congratulate you upon having such a bright and wide-awake Dental Journal and for the very worthy aims it stands for. I wish you success.

Yours truly,

A. Irwin, D. D. S.

Member of the New Jersey State Board of Registration.

WHAT IS THE MATTER WITH THE MEDICAL PROFESSION?

By James P. Warbasse, M. D.

[The article we print below is a good analysis of the economic conditions that prevent the medical practitioner from practicing his profession to the best of his ability and thus give the public the service they are entitled to. The analogy between the medical profession and the dental in this respect is so alike that with an imaginary change of the words, physician for dentist the able arguments of Dr. Warbasse apply with equal force to them. We hope every reader of the "Progressive Dentist" will read this article carefully and let us know what he thinks of it.

Editor]

The science of medicine has made wonderful progress in the past twenty-five years much knowledge has been added, and its capacity to help the sick and preserve the well has been greatly increased; but the average patient, with the average ill, who consults the average doctor does not get the benefit of it. This is because the doctor cannot afford the pains to give it, nor the patient the money to pay for it.

Most doctors and most patients are poor; and nearly all doctors and patients live in the fear of poverty, which is almost as bad as being poor. The poor man is always a dangerous person. It is the same, whether it be doctor or plumber who feels the pinch of poverty. The poor doctor is urged toward quackery, abortions, and illy-advised treatments; the plumber, out of a job, easily becomes a "hold-up" man. The fact that patients are poor means that they demand cheap cures, to gratify which the doctor too often must play the part of a charlatan.

The discussion of the causes of poverty is not within the scope of this article, but I believe poverty is capable of elimination from society, just as I believe that smallpox, typhoid fever, and tuberculosis are. There is abundant wealth for all, and there is no good reason why the working class, which produces the wealth, should have the least of it neither is there reason nor justice that the man who works faithfully at useful labor should live and die in poverty.

There are many things which once were private enterprises, much exploited for profit, but which now have been taken out of the hands of competitive business, and are controlled by the people. As examples of the socialized necessities may be mentioned the public schools, the highways water supply, street cleaning, and sewage disposal. The air for our lungs remains public property, but the food, oil, coal and wood have been taken away from the people and not yet restored. All of these are important; so is the public health. Some day the care for the public

health will be organized from top to bottom throughout as a public service, and we shall have each district with its medical corps. The sanitarian will be the strong man. His first business will be to keep his district as free from sickness as possible. His second business will be to keep his death rate low. This he will accomplish with the co-operation of the district hygienists, internists, surgeons, and other specialists.

The criminal now, receives the attention of the State, why not the sick man? The two have more in common than is yet realized. Society is beginning to acknowledge that the criminal is more sinned against than sinning. He is a victim of social maladjustment. Society is responsible for him. It made him what he is. This is equally true of the sick man. If society did not directly inflict him with his disease, it is apt to be the case that he is suffering as the result of lack of education; or his disease is the result of the wretched economic conditions imposed upon him. The sick man, the man out of a job, and the criminal are equally social problems. Society must soon answer in the affirmative the question that has come down through slavery and feudalism, "Am I my brother's keeper?" It must learn the meaning of the old Gospel that "No man liveth unto himself alone."

It is owed to the sick man, just as much as to the criminal, the insane, or the idiot, that society treat him as its especial obligation. How much more should this be the case with the child-bearing woman, who is now left in the hour of her travail to the chances of medical traffic for profit!

When the workingman's house is on fire, the community provides for him the most effective measures which wealth can secure to avert disaster. When his baby is stricken with disease, he is left to the mercy of commercial exploitation. Property, as an outgrowth of feudal tendencies, is still regarded by lawmakers as more precious than human life. The socialized fire-fighters prosper, as the fire is quickly and effectively extinguished; the commercialized disease fighter prospers as the patient is saved with the greatest amount of fuss and the greatest expense that the employer can, with satisfaction, be mulcted of. This latter, fortunately, is not yet the invariable rule in medical practice. Let us say it is an exception to the rule. But the fact is not to be disputed that "business methods" in medicine are steadily on the increase, as the pinch of economic necessity becomes greater.

Municipalities that have moved forward a step now have bureaus of fire prevention. Some day more public attention will be given to the prevention of disease. If the sick man is to be the case of the people, and if the State is to be held responsible for him, surely it should have a still greater concern for the well man, for of the two the latter is the more important.

The doctor has his talents to sell. He is in the market. The competition is fierce. Most doctors are capable and able to deliver the goods. But comparatively rarely can they afford to give the time to do the best possible thing for the patient. As a business enterprise, the practice of medicine—an occupation capable of most unselfish and beneficent activity—degrades its practitioner to the necessity of frittering away precious time in placating the whims of hysterical females, recounting his own prowess, animadverting upon his competitors, and stultifying himself with the mediocrity of conformity. The interest of business demands it. The general practitioner who neglects the methods of the tradesman, even though he gives to his patients the benefit of surpassing skill and knowledge, is apt to languish for a clientele. An unnecessary equipage, entailing a serious drain upon his finances if often one of the “successful” physician’s burdens. It is difficult, nay, impossible for him to do otherwise. He is surrounded by the competitive system, and, unless he conforms to the methods of the warfare about him, he must go down.

There are physicians with independent incomes, the results of the fortunes of others, and there are those whose unusual talents bring them so much work as to place them outside the circle of competition. Both of these are exceptional. The doctors, along with all who have to work for wages, are feeling the effects of the gradual gravitation of the means of the production of wealth into the hands of the few, and the resulting growing discrepancy between the rewards for honest work and the cost of living.

It was not many years ago that a workingman who had a steady job was not thought of as a poor man, and ultimately he owned a home of his own. Today the reverse is the case. To say that a man is a workingman is equivalent to saying that he is a poor man. It requires but a few days of idleness to exhaust his surplus store, and then he must accept charity, steal, or starve. As to hard work earning him rest in his old age, it does not come except as the dole of charity.

Let us not make the mistake in this connection of pointing to the public service as corrupt, and politics as more corrupt. They have been corrupt, and they will continue to be, so long as surrounded by the capitalistic, competitive system. But when the people own the necessary means of production, when they own the socially necessary corporations, when the fundamental movement to abolish poverty is instituted, then the chief corrupting influences will be removed. The corruption of public officials is accomplished mainly by business interests. It is the great corporations that corrupt our legislative bodies. This is so well recognized that we grow indifferent to it, and the horror of its consequences scarcely sinks into the public conscience. The express companies are, but the Post Office Department is not corrupting legislatures. Private

corporations are corrupting the Post Office Department, but the public is not interested in corrupting itself.

The Medical Corps of the Army and Navy are removed from the field of commercial competition, and although surrounded by the pernicious influences of the competitive system, they maintain a high standard of efficiency. The inconsistency of our method is that the medical treatment of soldiers is socialized. Soldiers receive the best of medical attention, not as a charity, but as a right. But the laboring man and woman—and child—are left without such consideration. They who do the work of the world, and without whom no army could be assembled, are called "hands," and are consumed as so much raw material to be fed to the flames of commerce. The nearest society comes to giving them the attention that it accords to its soldiers is when abject poverty overtakes them. Then they may have bestowed upon them, by the Departments of Charities and Correction, medical attention.

Some day the workers, who create the nation's wealth, and the women who bear the children, will be appreciated as being of an importance equal, at least, to that of the soldier. Our civilization has not yet reached that point, for the worker has only just emerged from serfdom, while the soldier has behind him the prestige of many thousand years of fatuous superiority.

When the practice of medicine is taken out of the realm of commercial competition, the aptitude of the physician may then be considered. At present there is no vocational selection with reference to adaptability. In the public service there is. In medical practice there is dreadful waste of talent. There is no means for selecting and appointing to be a surgeon the man best qualified for surgery. It is largely a matter of chance. The result is that men who should be alienists are surgeons, and men with wonderful natural aptitude for surgery are general practitioners.

The socialization of medicine does not mean that there shall be no private practitioners. Undoubtedly there will be, just as there will be private business enterprises in fields which do not involve the necessities of life, or which spring up because of individual preference or expression. But whatever springs up outside the State, if it is desirable for all of the people, will find itself shortly taken over by the public. A physician of some special talent, or anarchistic taste, may prefer to withhold himself from the State and stand alone. Patients should continue to have the privilege of delivering themselves into the hands of private enterprises, just as now, if they so desire.

Quackery is one of the results of our competitive system. The patent medicine business depends upon advertising. Competition compels the newspapers to collusion with this class of crime. Self-medication and

the resort to quackery are encouraged as business enterprises by all the powers of business as well as by the economic necessities of the patient. Give the workingman the privileges of competent medical advice without cost, preceed this by the education that is now denied him, and he will spend little money on quackery. Even though he might be inclined to, there should be no quackery for him to patronize. In a country socialized in the interest of the people, and the god of business profits cast down from its throne, a league for the freedom of quackery could not exist.

The socialization of the care of the public health is not going to check scientific competition. It is going to stimulate it. The greatest scientific advancements in medicine are not now coming from the field of the commercial struggle for existence occupied by the medical practitioner. They are coming from the men who, by public or private means, have been removed from its blighting influence. The financial reward has not been the object which has stimulated the great medical discoveries. Now it is well recognized that the doctor who is engaged in the competitive struggle for a livelihood is the least likely to contribute to the progress of science. Surgery is the last exception, but it is rapidly becoming commercialized, and soon its best progress will depend upon the financially independent workers.

Institutions endowed by private means or supported by the State, institutions removed from the field of business competition by virtue of the extraordinary talents of their workers, and branches of the government maintaining medical departments are the sources to which we now look for the best advancement of medical science.

Servetus and Harvey were not spurred on to the discovery of the blood by the expectation of profits. One was burned at the stake and the other was mobbed for his pains. Read the life of Pasteur, the founder of bacteriology and the science of infections, and see how utterly free from the glimmer of gold is the work of this great man. Yellow fever, malaria, typhoid, tuberculosis, hookworm disease, sleeping sickness, and rabies have had their secrets discovered and the possibility of their mastery demonstrated by scientific men competing not for profit, but for service. That the "curse of gold" appeared in the development of anesthesia is the one stigma upon this great boon; but had the dirty question of profit never entered, we should have had anesthesia just as soon.

The whole history of medicine, with its splendid list of martyrs, is a glorious refutation of the sophistry that competition for profit is important to human progress. The competitive system, which surrounds and harasses medical advancement, hindered it from the beginning, and retards it still.

When humanity throws off the burden of competition for the necessities of life; when the distribution of wealth is regulated by the deserts and needs of the people; when human life and happiness shall be the object of solicitude of the State, the profession of medicine will take its place as the great conservator of the most precious of the nation's natural resources.

The matter with the medical profession is that the doctor is a private tradesman engaged in a competitive business for profit. He should be a public servant. His importance to the people and the value to the nation of their physical well being demands it, and some day will receive it.

"New York Sunday Call"



SOCIALISM AT MICHIGAN UNIVERSITY

(Continued from the October issue).

Up to the year of 1910-1911 what interest had been taken was largely such as students would show. They wanted to do, but did not know what to do. At this time, however, there happened something which gave to this group not only new impulse, but direction for further efforts.

Faculty Member Let Out.

Dr. William E. Bohn, a member of the university faculty of the rhetoric department, because of his alleged activity in political propaganda for socialism, was dismissed from the faculty. Though his dismissal was a serious blow, serious enough to check for a time all activity on the part of the student members, nevertheless the setback was only temporary, only a lull before the storm. The beginning of 1910 saw but little activity, except in the nature of preparation for the organization that was to come.

By the middle of the year the organization was running full blast. The Rev. Carl S. Patton, formerly of the Congregational Church, gave his advice and support, as did the members of the university faculty. A lecture on "Socialism and Art," by Dr. R. W. Sellars, gave the members much encouragement. Another was given by Dr. W. W. Florer, a member of the university faculty, who, it has been claimed by Socialists, has done more than any other one man in the State to advance Socialist propaganda with his anti-Socialist lecture. Another successful lecture was given by Alexander Irvine, once a famous pulpit orator, now Socialist agitator, to whom the society gives the credit for the wonderful growth of the movement in the University of Michigan. This closed the year, but various and detailed plans were laid by a committee appointed to work during the summer months. Increased membership had become an assured thing. In addition to this, a problem of greater importance presented itself. The attention attracted by the heated discussion that had followed Dr. Florer's lecture was more than any one had bargained for. Students and faculty and townspeople suddenly found themselves interested in Socialism to such an extent that the trustees of the Congregational Church decided that sanctity of the parlors of the church was seriously in danger, as long as they offered shelter to the Intercollegiate Socialist Society, and the society was asked to give up its privilege of meeting there.

Some Ups and Downs.

The University Young Men's Christian Association then offered them the use of one of the rooms in McMillan Hall, but before the end of the year it was discovered that the University Y. M. C. A. had in turn been crowded out of its quarters, and so it was said that the fact that it had given shelter to the Intercollegiate Socialist Society was used as a slander against the Christian Association.

So once more the Socialists found themselves in the street. Then came the fall of 1911. There were thirty members at the beginning of the year. Meetings were held in the parlors of the Unitarian Church, secured largely through the efforts of the minister of that church, Dr. Percy M. Dawson. Officers were elected as follows: Executive committee, R. W. Sellars, Percy Dawson, W. M. Nelson; corresponding secretary, Geo. H. Bishop; recording secretary, O. C. Marckwardt; treasurer, Salome T. Marckwardt.

An increasing membership made necessary and possible a greater and greater activity, as well as a clearer idea as to the function of the society. And the function is: "We recognize that because of its peculiar position in our social organism, no university, as such, can be expected to approach our modern social problems with that sympathy necessary for any adequate solution of them. The class room should serve no other purpose than offer opportunity for dispassionate study. The professor must not take sides.

"Therefore it is as students and future citizens that this group is banded together for the purpose of giving these problems not only intelligent but sympathetic interest. They are to form the nucleus of all activity to promote an intelligent discussion and understanding of all problems, social and political, that confront us today. We are in the business of making citizens."

The society gets some of the best students on the campus, over one-fourth of its members belonging to honor societies in the university, a scholarship exceeding in proportion that of any other social organization at Michigan. It is interesting to know that no fraternity boy or no sorority girl was ever a member of the Intercollegiate Socialist Society.

Dr. Florer's Compliment.

Dr. W. W. Florer, professor of German in the university, in a talk recently, said to the members: "They are most active students on the campus; they read, and think, and study; they are serious, all of them, serious and alive."

Wellington Tinker, assistant secretary of the University Y. M. C. A., said: "The boys and girls who compose that group represent the best brains on the campus. They get things done; they are bright and active boys and girls to work with; they would serve as examples for any one to follow in class and out of class."

The organization now numbers fifty members. The steady growth of it can best be comprehended by a comparison with other campus organizations. Good government clubs have been started from time to time, having more or less the moral support of the university authorities, but they seldom lived longer than a year. A divinity club, founded simultaneously with the Intercollegiate Socialist Society, has long been defunct. Sporadic religious and political interests now and then evolved into groups or societies, found in the course of a year or two that the ties that bound them were gone.

"But here we have a society," said an enthusiastic member, "which, when not actually frowned upon by the faculty, has even been treated with indifference; and still, in spite of these obstacles, it has grown in its activities so that in the course of the past year it has distributed among the student body \$500 worth of lectures and literature. In this respect this society passes unchallenged as the most active organization of its kind in this country."

As illustration of one phase of its strength, when a straw vote was pulled off by the Michigan Daily, the students' publication, balloting extended over a period of two weeks with little consequence, until it was learned that the Socialists had entered the field by nominating Debs. Then things began to happen. The Roosevelt and Wilson and Taft clubs on the campus began to hustle. The last two days saw tremendous activity. The result was that a larger Socialist vote was polled here than at any other school in the country. The University of Michigan was the first to put up a Socialist ticket, with the result that when news of the returns began to appear in the daily metropolitan papers, other large schools followed suit.

None of them, however, not even Wisconsin University, an alleged Socialist stronghold, showed the number of votes polled here at Michigan. **Osborn's Letter.**

Governor Chase S. Osborn wrote to the Michigan Socialist Society in response to an invitation requesting him to address the club: "I hope the Socialist society will continue to be prosperous and to invoke the interest of all who are inclined toward Socialism. The right way of the future is to be discovered by those who are making earnest search for the truth, and I believe that you are doing that above all other considerations and before you take any thought of practical political profit. The truth is what we should all desire, and if it can come through the work of educated Socialism, it will be none the less welcome."

The activities of these student Socialists are varied. Anything that will further intelligent study and interest in Socialism and allied topics is their business. They organize study groups, meet bi-weekly and discuss. They have reports on new books and current events, interpreting the latter from the viewpoint of Socialism. They bring speakers to Ann Arbor, among whom have been Arthur Brooks Baker, of Esperanto fame; A. W. Ricker, of the Appeal to Reason; Frank Bohn, formerly of Columbia University, now associate editor of the International Socialist Review. The event of the year, however, was the last lecture delivered Jun 6, by Alexander Irvine on "The Message of Victor Hugo to the Twentieth Century." This was by far the largest meeting of the year, over 500 students, faculty and townspeople being present.

Go on Lecture Platform.

Though primarily given over to the study of Socialism rather than its propaganda, the Intercollegiate Socialist Society has of late branched out into an activity which makes it unique among organizations of its kind. The society soon developed among its members no little talent for lecturing. A very urgent demand from many cities in lower Michigan for

speakers brought to fruition the idea of supplying these cities. Robert Hess, Peter Fagan, Maurice Seegar and Walter Nelson were the speakers on the Intercollegiate lecture course whose services were soon in great demand.

Plans for next year are already under way. Pledges for membership to the extent of 100 have already been secured. This increased membership makes possible a dream of two years' standing. The S. L. A. course, the big lecture course, the official non-Socialist students' lecture course, by reason of its constantly diminishing attendance, caused it is said, by booking each year a poorer and poorer grade of speakers, has become extinct. The Intercollegiate Socialist Society is now in correspondence with many of the country's famous Socialist speakers, and will put on a lecture course for the coming year. Among the speakers that the society has secured are Morris Hillquit, a New York lawyer and writer; Eugene V. Debs, Presidential candidate; Victor Berger, Socialist member of Congress; Charles Edward Russell, magazine writer; Alexander Irvine, Dr. Frank Bohn and Prof. John Kennedy of Chicago University.

Sandwiched in between these speakers, student members of the organization will give talks and debates, and conduct quiz sections. In various groups of ten or twelve, different lines of activity will be taken up, such as a closer study of Marx, a review of the history of Socialism, the interpretation of current events and various other lines. Unique among these will be a class for drill in public speaking.

Social Activities Also.

The social activities are not lost sight of. The dances given from time to time by this society are becoming more and more popular, and are more and more numerous attended. Social evenings indoors in the winter, and all-day outdoor picnics in the early fall and summer are a further part of the social life.

For next year three further lines of activity are planned, a singing club, consisting of a double quartet, plans for which are well under way; a debating team to contest with teams from the various literary societies; a drama study club under the direction of a member of the faculty, which will stage one of the modern plays.

Quarters for the coming year presented to the society a real problem. "We need a hall of our own, and we can get it, too," said G. H. Bishop, secretary of the society; "a real auditorium, with a seating capacity of from four to five hundred with parlors for our smaller meetings and also for purposes of entertainment in a social way, and plans are almost mature for it. This would remove any restrictions that might arise from a relation of tenancy under the roof of the conservatively religious organizations. The society would be unhampered. Its great future purpose in the university is to present to Michigan students serious things to think about.

"Membership in this society does not imply agreements with Socialist principles and doctrines, but merely indicates a willingness to have these principles carefully and seriously investigated, and makes an appeal to the college man and woman to study Socialism earnestly and candidly."

(Detroit Free Press)

SOCIALISM EXPLAINED

By Guy McClung

Socialism is not hard either to explain or understand.

Here is the situation: The world's people belong to or support one of the two great classes, capitalists or workers.

What have we got? Nothing. What have they got? Everything.

Now we want it. Simple, isn't it?

We demand all they've got. Why? Because they have stolen it from us. We are the disinherited of the earth and we are getting ready to take back what belongs to us. We have waked up to the fact that the few have no right to enjoy all the good things of life while the many live in want and die in misery. We have discovered that we are running a race in which they have a hundred yard start; we have entered a contest in which they have the upper hand; we are sitting around a table on which the cards are stacked; we are playing a game for which they have made the rules.

They told us in the beginning that there was a chance for all. Now we know that they lied.

We have become wise to the fact that we are the victims, the suckers, the fallguys, in the greatest bunco game ever invented. We put all we had into it — our health, our hopes, our strength and power to labor — but everything went merely to make them richer and stronger. The result is that they are the owners of everything that makes life worth living.

We want it back. Now how are we going to get it?

Ask them for it? They would hand us the laugh.

Buy it from them? It never belonged to them in the first place — no, we are going to take it.

Take it how? By force? No, not necessarily. By bullets? We are not so foolish. We have the power already. We far outnumber them and our brains, when used, are as good as theirs. Therefore, we will organize our power and use our brains in our own behalf hereafter instead of theirs. When the workers are once solidly united the system by which the capitalists daily rob us of the fruits of our toil will simply fall of its own weight. There will be nothing under it to support it any longer and each man will then own his job and retain for himself the value of his product. — International Socialist Review.

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In answering advertisements please mention the Progressive Dentist.

The Progressive Dentist

Vol. 2

December 1912

No 3

UNFORTUNATE CONDITIONS.

BY MARK J. EMELIN, D.D.S., New York.

"Night's black mantle covers all alike."

We have learned that the true causes of all diseases are defective organization and pathological conditions, which manifest themselves as a result of the blunders of man. As we cannot separate cause from effect, so no one can scientifically arrest the decay of teeth, or treat the diseases of the oral cavity, without knowing or surmounting their actual causes, existing perhaps at the very hour the infant is brought to light. To neglect the study of causes and cure is to remain in childish ignorance. Progressive medication being still empirical, we must rely on hygiene and patiently await the favors of nature. I firmly believe that the narrow-mindedness of specialization is particularly responsible for many unfortunate conditions of to-day, and that the theory of bacteria has reached a stage of fanaticism at which the cause is often confounded with effect. We cannot insist too emphatically that to achieve speedy and successful results we must co-operate with several medical specialists. So also no medical specialist is administering the right mode of treatment unless he suggests the services of the dentist to restore the oral cavity to a normal and sanitary condition.

Can we imagine nasal lesions, pronounced dyspeptic or gynecological manifestations, faulty metabolism, genital debility, dejected spirits without caries of teeth or pyorrhœa? Barring genital debility, intestinal ills and criminal negligence, I dare say that man or animal, having a healthy respiratory system, and whose lips never part for the admission of air, in any way, is substantially immune from caries of teeth. After years of observation one must come to the conclusion that of all the enumerated causes of oral affections, namely, gynecological disturbances and genital debilities are very prominent, while nasal lesions with their disastrous consequences form the most extensive class of causes.

The dental profession can do little justice to suffering mankind without seriously considering this view of the etiology of oral disorders, whether inherited or acquired. The monstrous chain of diseases, especially mouth-breathing, coupled with modern nervousness, in its broad sense, transforms the beautiful vestibule into a receptacle for filth and a laboratory of decay.

Filling teeth is neither a permanent nor a complete cure; it is just a supplemental, palliative measure, and is on a par with the popular and professional abuse of nasal cutting and nasal douching. This last fallacious practice probably never before was so extensive as it is now, and the alarming percentage of grave effects that follow this treatment deserves its cap-full of condemnation. May these lines be a warning against such reckless methods!

The question of normal breathing is essentially of more concern than most problems of modern sanitation and medical research. Yet the thoughtful solution of breathing, consistent with best health, will universally elevate the standard of mankind, enabling it readily to respond to healthy recreations. The deplorable mouth-breathers—a type of air despoilers—who, like turtles, swallow air, must of necessity be in perpetual slavery to the dentist. Both oral hygiene and oral prophylaxis will fail unless we definitely establish normal breathing.

Dr. Osler says, and his words are timely, "If I were asked to say whether more physical deterioration was produced by alcohol or by defective teeth, I should unhesitatingly say defective teeth." Yet as habitual intemperate drinking is a crying evil, so defective breathing is a human calamity, and man's untimely genital debility a great tragedy. The extent and mode of dissipation greatly account for this dreadful pyorrhœa alveolaris and for the time at which it appears, which usually is at the age of 35-37.

The true phenomenon of pyorrhœa, to my mind, is associated with and can evidently be traced to the *premature* loss of genital functions, and is in strict ratio to the severity of the causes which have produced it. Being mindful of the many theories advanced, it is all for the best to maintain that pyorrhœa is not itself a disease, but is an expression and a suggestive symptom of my presentment. The number of unfortunate women afflicted with pyorrhœa is comparatively so small that I should say that this evil is typically a man's disease, and if it be accompanied by fatty degeneration instead of general debility with loss of muscular tissue, this decidedly symptomatic affection is highly destructive to the life of teeth. Pyorrhœa alveolaris reveals that which very few readily disclose, until some day, at an advanced age, the victim assumes courage enough to confide in the specialist.

Granting Dr. Talbot's claim, that pyorrhœa in canines is like that in man, to me it seems that dogs, incapable of speech, would be worthless as materials to clinicians, since these or other animals could neither express nor give a clinical history, or any information as to whether pyorrhœa in dogs is a symptom of genital debility or a local issue. Possibly all causes of impotence and sterility in men or women are productive of pyorrhœa.

The truth of this dental Pandora's box could be established only by exhaustive efforts of specialists in this particular direction. The competent and thoughtful dentist is fully prepared to master the details of local treatment by any of the various excellent methods. The prognosis of this dreadful evil is entirely dependent both on whether the genital debility is of a temporary or permanent nature and the extent of injury. My experience does not warrant me to specifically determine the length of time of the inefficiency, from the decline to complete loss of manhood, required to develop marked pyorrhœa, but the large number of instances to my knowledge lead me to think that a period of time from two to four years of this decline sufficiently expresses an ostensible pyorrhœa.

Pyorrhœa manifested in the first years of premature sexual decline implying diabetes, albuminuria, cerebral defects, etc., is still hopeful of cure if normal conditions be favorably restored by the allied tact and skill of both the physician and the dentist. Thus, let us set a closer watch on the mouth, the nose and the education of moderation of sexual senses, and no better or nobler cause is worthy of both the dental and medical professions.

Need of Co-operation of Physician with the Dentist.

BY DR. H. GOLDINBERG.

The professors at college never tire impressing upon our minds the necessity of co-operation with the patients' family physicians in order to facilitate our work in elucidating many an important fact in the diagnosis of dental cases. So deeply rooted is this in our minds, that not very seldom do we find ourselves greatly embarrassed, especially as beginners, when a patient, whose physical condition is subject to question, presents himself before us for the first time. The value of co-operation of the dentist with the physician cannot be too emphatically advocated for the mutual benefit of the parties concerned.

Should the medical student also be impressed with the necessity of co-operation with the dentist in the diagnosis of e.g. certain phases of antrum, ear troubles, alveolar abscesses, etc., many a useless though skillful operation could be dispensed with.

Dr. Maurice Green, in an article on "The M.D., the Dentist, and the Alveolar Abscess," which appeared in the June issue of the *PROGRESSIVE DENTIST*, exposes the ignorance and vanity of some physicians in not consulting the dentist when balked in the treatment of alveolar abscesses. Since this affliction is within the domain of the dentist the average physician should in such cases have recourse to the aid of the dentist. The treatment of alveolar abscesses thus establishes one reason for the co-operation of the physician with the dentist.

Phases of facial neuralgia attributed to antrum and ear troubles as shown in the following two cases have furthermore convinced me of this dire need of co-operation.

CASE 1.—Mr. McP——, age 30, printer by trade, suffering from facial neuralgia in molar region of superior maxillary bones, applied for treatment in a Polyclinic in 1904. From history given by patient he had been treated for antrum troubles. No relief had been obtained. Last year he called on me for the extraction of the upper right third molar. On examination I found the tooth had no cavity.
(See cut A below.)



A

B

Upper Right 3rd Molar

Upper Left 3rd Molar

Teeth photographed to reproduce as near as possible their respective position in the maxillary bones

I objected to the extraction and advised the taking of a radiograph. But the patient could not afford the expense and as he was obstinate in his determination, I extracted the tooth using a cocaine solution as local anæsthetic. Relief was instantaneous, and the neuralgia of right side disappeared. Being successful in this case he called my attention to his left side. There I found the third upper molar imbedded. I advised a radiograph, and again I received a negative reply. He furthermore insisted upon immediate extraction, which I did, using a cocaine solution as local anæsthetic. The operation lasted fully fifteen minutes, the patient, however, suffering no pain. After extraction neuralgia of that side also disappeared. (The shape of the tooth is shown in cut B.) Had the physician to whom the patient applied for treatment taken a radiograph or consulted a dentist, the antrum operation, the expense, the pain and the disappointment would have been avoided.

CASE 2.—Miss K——, about twenty-five years of age, teacher of elocution and aspirant to the operatic stage, but had no hope of realizing her theatrical ambition because of deafness on the left ear for the last four years. Presented herself to me for dental treatment. Miss K—— had previously been unsuccessfully operated by a prominent New York ear specialist. The auditory defect and the treatment she underwent had greatly enhanced her general nervous condition. Upon examination I found the following conditions present:

- (1) Root of lower second bicuspid of left side of mandible.
- (2) Exposure of pulp of second lower molar left side of mandible.

The pulps of the molar were removed, the tooth treated and filled. I then decided to extract the root. Cocaine solution has been used as a local anæsthetic. As soon as I extracted the root, the patient fainted. After revival and while readjusting the chair, as my body was inclined towards the patient, she seized my watch, applied it to her left ear, and exclaimed that she heard the sound for the first time in four years.

The restoration of the sense of hearing has so far proved permanent. Had the physician consulted a dentist in this case, most likely there would have been no need for an operation in the ear.



Extraction of the Teeth

By S. P. RATNER, D.D.S.

It is not the purpose of the writer to enter into a discussion of the advisability or non-advisability of the extraction of certain teeth. It is not his purpose to denounce the man who condemns every carious tooth to the forceps, nor to defend the man who is saving every tooth, pulpless or necrosed, as well as those requiring devitalization. It is the purpose of the writer to briefly discuss the best methods of the operation of extracting teeth as met with in the average dental office, having in mind, chiefly, the beginner in dentistry or the one who does not consider himself a veteran in practice.

The operation of extracting teeth requires experience more than anything else. Good judgement, skill, accurate knowledge of the anatomy of the teeth and adjacent parts are also assets that go in the making of a good extractor, yet, experience is the most essential of them all.

A dentist (duly licensed) is not an extractor and cannot pass himself off for one simply because he has just purchased a complete outfit of forceps, gas apparatus, mouth prop, etc. The mere acquisition of the instruments has not advanced him a single step in his art. The operator must remember that the health, happiness, nay, even the life of the patient depend on him. The moral responsibility rests upon him and upon him only; he cannot dodge it, he cannot and must not ignore it.

The writer realizes the great task he has undertaken in writing upon such an important topic, but it was none of his choosing. Whether he succeeds in making this article instructive is for the reader to decide. His own experience and his own mistakes are the chief sources from which his conclusions are drawn.

General Principles.

Whether you administer a local or general anæsthetic your aim should be the extraction of the tooth or teeth, causing the least pain. Aim to cause the least injury to contiguous parts while extracting, try to remove root "clean." When you are to choose between injuring the parts and the leaving of the roots unremoved, then, by all means choose the first. But, in such cases better warn the patient of the possible danger. If the patient balks at the proposition, let him go. You will not lose much, but you will save your reputation.

Your fee for a difficult extraction should always be higher than for an ordinary one. You take more responsibility and, probably, you will have to see the patient a few times before you dismiss him.

Learn to have self confidence; don't be timid; don't lose yourself, for your behavior has a remarkable effect upon the patient; warn him of danger, should any exist. Be honest; if you did not succeed to remove the root, tell that fact to the patient. Don't dismiss him with the usual clap on the back "it is all out, rinse your mouth." Be ready for emergencies, expect the worst, don't be caught unawares.

The Operation of Extracting of Teeth

With very few exceptions the writer uses only one pair of forceps for the removal of all upper teeth; this is an S. S. White No. 286 forceps. It is an alveolar, knuckled, bayonet shaped forceps with rather narrow beaks.

Central.—The extraction of the upper central is rather a very simple procedure. Force the beaks of the forceps beyond the neck of the tooth and with a rotary motion loosen it from its attachments and remove. In many cases, however, caries has gone so far that the root is entirely hidden by overlying tissues and the outline of the root is obscured from view. Many an operator will extract such a root by "going over" the process and squeezing it out, thereby causing great injury to parts. This is absolutely unnecessary; the removal of such a root, in most instances, could be accomplished without lacerating the gum in the least. With a sharp lancet make a circular incision on the facial aspect of the root, then make a longitudinal incision facially and lingually along the long axis of the tooth, insert the beaks along the incision and remove root in that manner. The incisions will readily heal by first intention.

Lateral.—The extraction of the lateral is very similar to that of the central with the exception that it is possible to break off the apical portion of the root due to its thinness and slight curvature. To avoid this it is imperative to loosen it slowly from the pericementum and never to "swing it out." A difficult or rather puzzling problem will confront you when it becomes necessary to extract a lateral root that is in lingual occlusion, both adjoining central and canine teeth remaining in position and locking in the lateral. It would be futile to attempt the extraction in the ordinary way for the space left facially between central and canine is too narrow to admit any beaks, no matter how narrow. In such cases you will find the lower alveolar forceps (narrow beaks, full curve) of great assistance. Grasp the root mesiodistally on its lingual aspect and with a backward and downward motion the root will be loosened and removed.

Canines.—The extraction of the canines requires sometimes great strength especially on young people, adjoining teeth remaining in position. Obtain a good grip and with a combined rotary, forward and backward movement detach it from its pericementum. Don't "swing canines out." It is in the writer's experience where he removed a canine with results that might have been disastrous.

Mrs. M., 45 years old, had all badly broken down roots removed preparatory to the construction of a partial upper denture. The patient was requested to call in about two months. At that date on examining the mouth the writer noticed something that looked like an erupting tooth. On further examination this was confirmed. An unerupted canine was making its way pointing towards the roof of the mouth. In attempting to remove it, it was found to be almost impossible, so dense and unyielding were its attachments. Despairing of its possible removal the writer "swung it out" and . . . the whole facial wall of alveolus from about the central to the first molar region fractured, exposing the canine up to its very apex. With a quick motion the lancet was used to dissect out the root, an interproximal scaler inserted to evert the root. The tooth was removed with a goodly portion of alveolus adhering to it. The broken alveolus with overlying tissues was pressed back into position, the whole area washed out with a warm saline solution; pressure by means of cotton and bandage applied and patient dismissed with instructions to call the next day. Luckily, no trouble occurred and area healed in about fifteen days.

First Bicuspid.—This tooth is the stumbling block for all beginners. The first bicuspid is more often broken by the beginner than any other tooth in the mouth. It is due to the density of the alveolus in this region, especially so when adjoining teeth are in position. The surest way to remove these roots is to incise the gum upon facial and lingual aspects in a line corresponding to the long axis of the tooth, the beaks of the forceps should be inserted along the incisions and with a quick pressure upon the handles of the forceps cut through the alveolar process and remove root; don't chew it piece by piece, do it right, save yourself a whole lot of worry and anxiety.

Second Bicuspid.—This tooth is easier to extract than the first bicuspid on account of it having a single root. Otherwise the procedure of the operation is the same as that of the first, and needs no further description. Be careful not to push the root upwards for it might break through the floor of the maxillary sinus, the sequelæ of which are well known to every practitioner.

First Molar.—As a rule does not present any hardships for removal. Be sure to have the lingual beak beyond the cervix and the facial beak between the bifurcation of the two facial roots. Dislodge the tooth by a rocking instead of a simple outward movement. By these means you will avoid the fracturing of the alveolar process on its facial aspect and also the breaking off of one or both of the facial roots. In case the tooth is decayed beyond the free margin of the gum, it is best to remove the roots singly, less injury being done that way.

Second Molar.—Same method used in extracting as for first molar.

Third Molar.—Sometimes presents difficulties to extract on account of its position and in some cases on account of abnormal curvature of the roots. Great force is sometimes required to dislodge it. In most cases, however, the root is single and then the extraction becomes a very simple matter.

(To be Continued in January Issue)

The Open-Face Crown

BY DR. MAURICE M. RAFKIN.

[We are pleased to announce that Dr. Rafkin has undertaken to write a series of articles for the PROGRESSIVE DENTIST on Prosthetic Dentistry. Dr. Rafkin's long experience in this line of dental work enables him to describe the technic as very few dentists can, hence we trust that the series will prove of interest and value to our readers.—EDITOR.]

Very often dentists complain that they have a good deal of trouble in constructing a good open-face crown, also that the crowns turned out are a disappointment to both the patient and the dentist.

The following are some of the points that the dentists have difficulty in overcoming:

(1) An open-face crown cannot be made to fit at the neck portion of the tooth without cutting the tooth mesially, distally and morsally, which of course affects the natural appearance of the tooth.

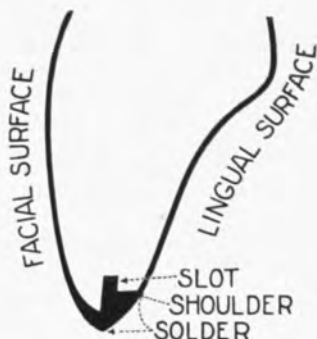
(2) The crown loosens after it is worn for some time, because of the poor fit, which results in the cement being washed out.

(3) Accumulation of food substances takes place between the narrow band and the labial portion of the tooth it rests upon, also beyond the band, under the free margin of the gum, causing irritation then recession of the gum, and very often a loosening of the tooth.

(4) The tooth under the open-face crown often becomes sensitive, discolors, caries sets in, and finally devitalization of the pulp results.

All of these points I have given considerable thought, and came to the conclusion that the average dental practitioner does not use enough discretion where certain work should or should not be made. In the first place open-face crowns ought not to be made on bell-shaped teeth, but may be made on thick-neck teeth with fair results.

Very seldom do I make open-face crowns, but when I do the following method I employ: With a fine stone or separating disk I form a slight shoulder at the linguo-incisal surface (without grinding the facio-morsal surface) running from the mesial to the distal surface. I then make a slot in the shoulder, one at the mesial and one at the distal surface (see cut below).



The shoulder and the slots that are formed on the gold crown when filled in with solder, act as an additional support to the band around the neck portion of the tooth. Also less gold need be shown, hence more tooth structure can be exposed. Note: Care should be taken not to grind any portion of the tooth that is to be exposed.

METHOD OF MAKING THE OPEN-FACE CROWN.

An impression is then taken of the tooth, and a model made. This model I extend by trimming it gingivally, 1-32 of an inch, so that the crown which is to be constructed on it, when cemented on the tooth in the mouth, should go beneath the gum margin.

A metal die is made after the model, and a shell is swedged out over it. I use a small swedge and mouldine for this purpose.

The crown is now boiled out in acid and annealed. I then fit it in the mouth just as I do an ordinary crown. With a sharp instrument I mark the labial portion of the gold crown that is to be cut out. I then remove the crown and with a fine separating disc I begin cutting out the window, and finish this process with the help of a small crown scissor and fine stone. This crown I place once more on the die and reswedge it. I then fill in with 22-karat solder the shoulder portion and the slots (see cut above), thus strengthening the crown and preventing distortion.

In cementing on this crown, I use hydraulic cement, mixing it to a fine creamy consistency. Very little cement should be used, as an excess will prevent the crown from going into place. A little cement should always be placed upon the labial portion of the tooth near the gingival margin, so as to make sure that some cement will be between the band and the tooth. Hold the crown in position after forcing it into place, and with a fine burnisher smoothen down the edges of the gold crown to the surfaces of the tooth.

The advantages of this open-face crown over the open-face crown generally made are:

- (1) That it fits snugly around the neck and sides of the tooth.
- (2) That the cement will not wash out.
- (3) That the crown will not become loose.
- (4) Caries will not occur.
- (5) No discoloration will take place, etc.

This open-face crown should prove of greater advantage than the open-face crowns that are ordinarily made which are the cause of much annoyance to the dentist. I have seen a crown as above described, in the mouth of a patient that was there for 10 years and looked good enough to serve another 10 years.



...The Progressive Dentist...

PUBLISHED MONTHLY BY THE
NEW YORK DENTISTS' CHAPTER

Intercollegiate Socialist Society

Dr. LOUIS RICE, Editor

423 East 6th Street

Dr. M. S. Calman, Business Manager

15 East 106th Street, N. Y.

Telephone Harlem 952

Subscription price 50 cents a year

EDITORIAL DEPARTMENT

With the recognition and establishment of Dentistry as a distinct profession came the enactment by the State of a code of laws regulating its practice. These laws are for the protection of the public against unskilled and untrained individuals dispensing dental services. These laws also prescribe the degree of training one must obtain before he is permitted to practice dentistry. The wisdom and need of such laws are self evident, but the importance of the enforcement of such laws needs to be emphasized.

The State Dental Society, as the officially recognized representative of the dental profession of this State, is charged with the duty of seeing that the dental laws are enforced. But the State Dental Society neither truly and democratically represents the dental profession, nor does it acquit itself honorably of its duties as the entrusted guardian of the public's mouth. What we say of the State Dental Society collectively, equally refers back to the individual members belonging thereto.

As to the truth of our charges, we proceed with the following: Does the State Dental Society represent the dental profession of this State? Let us see. Article IX, §192 of the dental laws reads, among others, thus: "In any judicial district in which a district dental society is not now incorporated fifteen or more dentists of such district authorized to practice dentistry in this State may become a district dental society, etc." Note that the dental laws recognize each licensed dentist to be eligible to membership in a district dental society, but unfortunately through §193 of the same article of the dental laws, the members now within the district dental societies have the power to shut the doors of their respective societies to the overwhelming majority of the dentists. Thus only the few, who by basking in the glitter of the wealthy can afford to live up to what is called professional ethics [which, by the way, is of their own make] constitute the membership of the district dental societies whose delegates in turn constitute the State Dental Society. If, therefore, the State Dental Society can claim to be the representative of the dental profession of this State, we are at a loss to see by what right, other than legal, it makes that claim.

Does the State Dental Society enforce the dental laws? Not so that it can be noticed. Illegal practice is so rampant that the number of unlicensed practitioners in the Greater City perhaps equals the number of licensed dentists. What can you answer, gentlemen of the State Dental Society?

Why don't you stop the illegal practice of dentistry? Remember that by allowing such practice to flourish you are betraying the public's trust confided in you to protect it against quacks. Remember, also, that you are criminally treacherous to our noble profession. You know the evil influence that the illegal practice of dentistry has upon the standard of dental treatment and you stay by without raising a finger in protest. You know how much dignity accrues to our profession when dentists are in open competition with the illegal practitioners and you exert no effort to relieve such state of affairs. You are the protectors of our profession and you are enacting for us, the disinherited of the profession, a splendid farce. But you can't tell how soon we shall get upon the stage. Then, gentlemen, we will enact for you a drama.

A Card from Dr. Mendelson.

With the November issue of the PROGRESSIVE DENTIST I have ceased my editorial connection with same. I take this opportunity of thanking the comrades and members of the profession whose help and encouragement have made my work on the magazine a labor of love.

Fraternally yours,

DR. WM. MENDELSON.

LETTERS TO THE EDITOR

Dear Editor:

The October issue of your valued journal is better than ever, and is worthy of special commendation. Many conditions are manifest throughout the country which need the services of just such a publication, an open forum where all may have their say. You naturally do not expect all to agree to what appears on such a platform, and we gain many a helpful suggestion from the words of one who has the courage to write in the open.

I trust that success attend you even beyond your expectations, and with best wishes, I beg to remain,

Yours very truly,

C. EVERETT FIELD, M.D.,
New York City.

Dear Editor:

I inclose herewith check for one dollar for which kindly send the PROGRESSIVE DENTIST to my address (for two years).

Judging by the articles it is just the kind of publication we need. It is about time we wake up and get out of the old rut and old-fashioned ideas. Wish you all the success.

Can you spare any of the back issues?

Respectfully,

M. SCHWARTZ, D.D.S.,
Brooklyn, N. Y.

Few of our 20,000,000 School Children Healthy, says U. S. BUREAU OF EDUCATION.

Dr. Thomas D. Wood, of Columbia University, in an article just published by the United States Bureau of Education, makes these impressive statements:

It cannot be taken for granted that school children are healthy.

The majority of them are not as healthy as they should be or may be.

There are in the schools of the United States to-day approximately 20,000,000 pupils. Extensive observation of child health for twenty years and careful study of statistics and estimation of all conditions lead to the following conclusions:

From 300,000 to 400,000 (1½ to 2 per cent) of these pupils have organic heart disease.

Probably 1,000,000 at least (5 per cent) have now or have had tubercular disease of the lungs.

About 1,000,000 (5 per cent) have spinal curvature, flat feet or some other moderate deformity seriously enough to interfere with the child's health.

Over 1,000,000 (5 per cent) have defective hearing.

About 5,000,000 (25 per cent) have defective vision.

About 5,000,000 (25 per cent) are suffering from malnutrition, in many cases due in part at least to one or more of the other defects enumerated.

Over 6,000,000 (30 per cent) have enlarged tonsils, adenoids or enlarged cervical glands which need attention.

Over 10,000,000 (50 per cent, in some schools as high as 92 per cent) have defective teeth, which are potentially, if not actually, detrimental to health.

Several millions of the children possess each two or more of the handicapping defects.

About 15,000,000 (75 per cent) of the school children in this country need attention to-day for physical defects which are practically or completely remediable.

If it were possible to estimate accurately the gain to the race and to the nation in one generation by practicable care of child health, in preventable mortality and morbidity in escape from helplessness and hopelessness, in improvement of physical, intellectual and moral worth, of economic and industrial efficiency, of social and civic power, of human satisfaction and happiness, the country would be startled by one of the most stupendous facts in human history and energized into a telling educational reform. In fact it seems altogether probable that we are to-day in the beginning of this constructive health epoch.

The country is coming rapidly to recognition of the importance of this broader humanistic responsibility of education. Spasmodic, nobly intentioned efforts are being made all over this country to improve the foundations of education to correct physical weakness in child life

DENTAL SOCIETY NEWS

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EASTERN DENTAL SOCIETY

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CAFE BOULEVARD

156 Second Ave., Cor. 10th St.

Dr. A. LEWITTER, Sec'y
330 E. 4th Street, New York

KINGS COUNTY DENTAL SOCIETY

Meets the Second Thursday of each Month at
THE WILLOUGHBY MANSION

667 Willoughby Ave., Brooklyn

Dr. A. FRIEDENBERG, Sec'y
425 Bushwick Ave., Brooklyn

The Harlem Dental Society will hold its next regular meeting at the Savigny, 229 Lenox Ave., Thursday, December 26th, 1912, at 9 p. m.

A lecture will be delivered on some interesting topic, notice of which will be sent to the members later. Election of officers for the ensuing year will also take place.

At last month's meeting a lecture was delivered by Martin W. Ware, M.D., on "The border line affections calling for Dentistry and Surgery." Drs. M. Green, M. Friedland, S. M. Getzoff, A. D. Heller, C. Mayo, H. W. Rosalsky, M. S. Calman and others participated in the discussion that followed the lecture.

Nominations of officers for the ensuing year took place at this meeting.

The Ball of the Harlem Dental Society will take place at the Elsmere Hall, 126th St. near Lenox Ave., Thursday Eve., January 16th, 1912. This affair is the first that the society has undertaken, and promises to be a big success. There will be souvenirs for the ladies, and other features that will add greatly to the success of this affair.

On Thursday, December 5, 1912, the Eastern Dental Society held their regular meeting. Mr. Weinstein delivered an exposé on the "Goslee Tooth." Many interesting specimens, and the possibilities of the tooth were exhibited. A general discussion followed and many interesting points were brought out.

The society decided to open a class in post-graduate work, beginning with crown and bridge work. Members in good standing will be entitled to the benefits of this class for payment of a nominal fee of \$5.00.

Dr. Rice brought up the question of the *PROGRESSIVE DENTIST*, but owing to the late hour this was delayed until the next meeting.

At the next regular meeting of the Kings County Dental Society which takes place on Thursday evening, December 12, 1912, at 8:30 sharp, Dr. Herbert L. Wheeler, of New York will read a paper on: "Question of the Hygienic Construction of Artificial Substitutes in the Mouth." The paper will be discussed by Dr. E. Hillyer and Dr. W. C. Dean.

At last month's meeting, a lecture was delivered by M. I. Shamberg, M.D., D.D.S., on "Oral Surgery with special reference to diagnosis of obscure conditions." The lecture was illustrated by a collection of lantern slides. Dr. S. H. Dunning and Dr. W. J. Lederer discussed the lecture.

STUDENTS' DEPARTMENT

N. Y. C. D. NOTES.

The annual class elections of the New York College of Dentistry have taken place. The President of the Junior Class was prompt in giving us a list of the elected officers, which we print below. If the other two classes are desirous to have the names of their elected officers appear in this column, they are requested to send in the list with names written in full, through their respective class president or secretary.

Junior Class Officers.

Bernard Niflot	President
Leo Winter	Vice-President
Chas. H. Steinhäuser	Treasurer
Thomas E. J. Shanahan	Secretary
Al Diamond	Sergeant-at-Arms
Bartholomew J. Mitchell	Marshal

Nationalizing the Medical Profession

BY WILLIAM L. HOLT, M.D.

[Dr. Holt has written this article from the physician's point of view. However, no special adaptation is required, for almost to the minutest detail this article is applicable to the problems confronting the dentist. We suffer from the curse of the quack just the same as our medical cousins do. The dental parlor and the illegal practitioner would die a natural death if the practice of Dentistry would be nationalized.—EDITOR.]

Now that the American Medical Association is strongly supporting the movement for a Federal Department of Health, the question naturally occurs: Would it not be desirable to nationalize the whole of Medicine, the treatment as well as the prevention of disease? The brilliant English sociologist, George Bernard Shaw, recently recommended the nationalizing of Medicine before the British Medico-Legal Society, and Sir Victor Horsley agreed that this change was a desirable one. It is certainly worth our while, then, to consider how such a change would affect both the physicians and the people in America.

We must first form as clear an idea as possible of what such an arrangement would mean. Of course it would not mean that doctors would be appointed or elected just like other state and federal officers. The candidates would have to take a required course of training, equal to the best now given, and pass an examination as now; but no second-class medical schools could turn out half-trained graduates, nor would any states have lower examination standards than others. The instruction in all schools would be brought up to a uniform high standard, and the examinations for license would be uniform, and the license be a national one, valid in any state in the Union. Germany, England, France and other leading countries give a national license; our present system of separate state examinations and state licenses is worthy of a loose Confederacy rather than a true nation of United States. Dr. Henry Leffmann, Prof. of Chemistry at the Jefferson Medical College of Philadelphia, in an address before the Philadelphia County Medical Society last year, made a strong plea for such a national system of medical education and licensing. Any doctor who has gone west and had to waste much time and money in taking another State Board examination will appreciate the advantage of the single federal examination and license as much as I do.

Another advantage of this system is that it would effectually dispose of quacks; for no one would be given a license and salary who had not taken the regular required medical course and passed the federal examination; and furthermore no one would be such a fool as to pay a quack when he could get the services of the best physicians free. And patent medicines would soon die the same natural death; for when people found that they could get a good doctor's special prescription put up cheaper they would prefer it if for no other reason. Patent medicines like many other things which are made not to satisfy any real want but merely to make profits would no longer be manufactured by a socialistic nation.

But I am digressing from the main question. How would the physicians be organized? And how would they be paid? It would of course be idle to attempt a detailed answer to these questions; but it is safe to say that the arrangements would be based upon the fundamental principles which underlie all co-operative institutions, viz: (1) such a division of labor that each man so far as possible shall do the kind of work he can do best and enjoys most; (2) steady and sufficient employment, but without overwork, except in emergencies, and with long enough vacations to enable the physician to keep up with medical progress, to preserve his health, and to enjoy life; (3) his salary to depend entirely upon the quality and quantity of his work, but always to be sufficient to provide all the necessary comforts of life. Also, if any physician were accused of dishonesty or incompetency, his record would be investigated by some National Medical Council; and if the charges were substantiated, his license and his salary would be revoked, and he would have to enter some other occupation. A co-operative State would also assure to every physician, as to every citizen, a comfortable pension when he should become incapacitated for work on account of accident, illness, or old age; and his widow and children would also be comfortably and honorably supported if he died. This feature of socialism must appeal very strongly to us physicians, for the great majority of us accumulate very little wealth to leave our families besides a small life-insurance policy, which has been quite a burden often to carry during our lives, and provides a meagre support for them only for a few years after our death.

So much for certain general principles. I will now venture for the sake of stimulating thought and discussion to outline a plan of organization of the profession under socialism, for which I am alone responsible. I have no doubt that some of my readers can plan more wisely, and I shall hope to see other and better plans proposed and some day perhaps adopted.

First: No physician would receive private fees. If his patients paid anything, they would pay it into a general municipal or state fund for the profession. Every doctor would receive a minimum salary, when given his license, of say \$2,000 a year; he would be expected to keep a careful record of his number of cases and of all his work, and would receive extra pay in proportion to his skill and number of cases treated. A surgeon, who did more difficult work, requiring unusual skill and involving great responsibility would justly receive higher pay than the physician, even as now. But he would not be paid a thousand dollars for a single operation.

When medical service is made free to all, I think the demand for it will increase so greatly that many more physicians will be needed, except in those cities where the profession may have become badly overcrowded before the inauguration of the new regime. So for a while we may be, some of us, really overworked; but the consequent high salaries would at once cause an increased number of young men to study medicine, especially if the cost of a medical education were also greatly reduced, and in four or five years there would probably be plenty of licensed practitioners again; and before long the salaries would have to be reduced somewhat, or a severe competitive examination established and fewer applicants licensed to avoid overcrowding. If one State was particularly overcrowded, as California seems to be at present, no more physicians might be allowed to enter

practice there until more were needed; and vice versa, new licentiates might be asked to settle in some other state, where they were needed. The present anarchical system by which a young physician settles in a town that he likes or where he was brought up and waits for a practice, which may not support him decently until after four or five years, will of course be abolished along with other stupid, wasteful customs of our clumsy competitive system. A National Medical Council will find out accurately as possible how many physicians are needed and in what specialties in every county, city and town; and the new licentiate will be required to choose from a list of places where there are one or more men needed in the specialty which he desires to practice.

For I am sure that the present strong tendency toward specialization will continue, and go much further than now, especially in the smaller towns. In time the country doctor who still essays to cover the whole vast field of Medicine and Surgery will be as extinct as the scientist like Linnæus who covered the whole field of biology. I think a town of about three thousand people should have one doctor for all the obstetrical cases and women's diseases, one for the eye, ear, nose and throat, one for infants and children, one for surgery, one for general medical practice and one to examine the school children, to teach hygiene in the high school, to examine the milk and make other scientific examinations and perform the other duties of health officer. Is it not evident that if the work of six physicians in such a town was specialized in some such way, that each man would be enabled by his greater practice in one line of work to give the community much better service than he can now, when he is trying to treat all kinds of diseases in patients of all ages and sexes? Is it not universally admitted that the specialist in any branch is superior to the general practitioner in his particular specialty? And does not almost every young doctor nowadays desire to specialize and aim to do so just as soon as he can afford it? Every one of us finds some branch of Medicine more attractive than others and knows that he can do better work in that particular line. The chief reason why more of us do not devote ourselves to our favorite line of work is the insuperable economic one—we cannot get enough cases of that particular kind to earn us a good living.

Most of us young men feel that we must treat every kind of case we can get, although we may often know that some other doctor is a specialist in our patient's disease and could probably give him much better service. In plain words, competition for a living makes us not rarely sacrifice our patient's interests to our own economic necessity. The competition for patients, that is for a living, is so keen in many, if not in most, small towns that one doctor will rarely call another in consultation, no matter how unsuccessfully he may be diagnosing or treating the case, unless he is asked to do so by the patient himself or his family. Who knows how many lives have been sacrificed to this demon of professional jealousy, which is born of the brutal struggle for existence?

What is the greatest evil in the medical profession to-day if not this very jealousy, which has kept us divided into warring factions and individuals for so long that we have lost to a great extent the prestige and influence with the public that we should have? What is it but professional jealousy that explains why only half the doctors in my county are members

of the county and state medical societies, and only 30,000 physicians in the United States are members of the American Medical Association out of over 150,000? The fact seems to be that as a profession we hang together the least and quarrel the most; we show the least ability in promoting our own common interests, in short have the least "union-spirit" of any profession or occupation.

According to sociologic classification we physicians should be classed with neither the capitalists nor the workers, but in the special and highly honorable class of "social servants." This class includes doctors, lawyers, ministers, teachers and artists, all of whom are supposed to work for the community rather than any private individual or corporation. Hence we should be outside of the class struggle, and our sympathies should be naturally with the workers who are earning an honest living as we do ourselves.

But as a matter of fact, like the lawyers and ministers, most of us take the side of the ruling class, who pay us large fees, "give" us large hospitals, and establish fine research laboratories with the money they have taken from the people. We have the spirit of the small capitalist, who prides himself on his imaginary "independence" and holds on for dear life to the outgrown anarchical system of "free competition," which means in plain words "dog eat dog," or "Each man for himself and the devil take the hindmost."

This beautiful system, which has resulted inevitably in our present oppressive monopolies, has produced among other evils the crying one of lodge contract-practice. Under this pernicious system the poor doctor lets himself be exploited by the members of a fraternal lodge about as badly as the poor Jewish garment-workers are exploited in sweat-shops in New York. In return for a miserable pittance, such as \$2 a year per member, the poor doctor agrees to treat all the members (perhaps 200 or 300) of the lodge, and sometimes all their families to boot, for any cause at any time. I was asked to treat 200 "Eagles" and all their wives and children for the handsome sum of \$400 a year, or \$1.10 a day. A letter from a physician recently published in the I. A. M. A. revealed the shocking fact that in one town in Nevada this exploiting system had been carried to such a pass that almost every citizen was getting medical service for nearly nothing, and some new doctors arriving were actually forced to beg people to buy tickets entitling them to medical services for 25c. a month! How the workingmen who belong to these lodges, who get at the least twice the income of their lodge doctor, who know the supreme importance of their trade-union and of union principles, who recognize the non-union man, who agrees to work at low wages or to break a strike, as their worst enemy and hate him accordingly—how these workingmen, whom we physicians often consider our inferiors, must despise their lodge-doctors for scabbing on their fellow practitioners, and perhaps despise the rest of us for allowing it.

It is idle to blame the fraternal lodges for the system. Most of the members are actually too poor to afford to pay regular doctor's fees if they have much illness, and they do not realize that they cannot get careful, intelligent medical service by such a system. The poor young doctor who has spent all his capital on his expensive training, and often cannot earn

enough the first year to support himself, much less a family, cannot be blamed for preferring to "scab" on his fellow-doctors to any extent rather than to let his wife and children suffer from the hardships and disgrace of poverty.

There is but one scientific way to cure this shameful abuse of Medicine; that is to remove the cause, which is the lack of organization and of assured income among physicians. And can this be done in any better or equally just and effective way than by nationalizing the medical profession?

"CRITIC AND GUIDE."

The Socialist City

A typical Socialist city begins its reforms with the child, the bearer of the community's future. A socialist municipality almost invariably takes care of its working women during the period of confinement by providing free maternity hospitals with proper medical attendance. When the mother is ready to return to work the city continues to exercise a watchful and tender oversight of the child. Free municipal day nurseries, kindergartens, primary schools and schools for higher industries succeed each other in the task of rearing the child into healthful and enlightened manhood or womanhood. In most cases the city provides for its needy children, not only free instruction, but also medical care and even food and clothing. Seaside colonies and summer outings for all poor school children are quite common features in connection with the public school systems of Socialist cities.

Nor do the educational activities of Socialist municipalities end with the child. The cultivation of the fine arts and the dissemination of popular science among the adult workers, through the medium of municipal theaters, free concerts, reading rooms and public lectures is a most common feature of Socialist city administration.

Next to the all-important subject of education, the Socialists usually bestow their greatest care on the problems of public health.

Whenever a city under Socialist control contains slums or abnormally congested districts, the administration seeks to relieve the condition by the building of municipal dwelling houses and by increasing the number of parks and playgrounds. Municipal bathhouses, disinfecting plants, hospitals and dispensaries are established wherever practicable and physicians and nurses are placed at the services of the poor free of charge.

The Socialist municipalities as a rule are model employers and invariably reduce the hours of work and increase the wages of the municipal employes. With all this they are rarely extravagant in their expenditures and their finances are, as a rule, in better order than those of the capitalist governed cities. The increased expenditures which the many new activities involve are made up by economics in the administration of business, elimination of graft, and by forcing the wealthy citizens to pay their just shares of the taxes.—MORRIS HILLQUIT in the November *Metropolitan*.

I. S. S. Preparing for Annual Meet.

FOURTH CONVENTION TO BE HELD HERE DEC. 27 AND 28—

MANY PROMINENT PERSONS TO SPEAK.

What promises to be the largest and most enthusiastic gathering of college students interested in Socialism ever assembled in the United States will be the Fourth Annual Convention of the Intercollegiate Socialist Society to be held here December 27 and 28.

The convention will be opened by President J. G. Phelps Stokes, Friday afternoon at 2:30 at the studio of Miss Helen Phelps Stokes, 90 Grove street. At this session reports will be given from the more than 60 undergraduates and a half dozen graduate chapters of the society in the colleges of the East and West. Fraternal delegates from unorganized colleges will also report the progress in their institutions.

Friday evening the New York chapter will give a reception to the visiting delegates and friends at the Finch School, 61 East 77th street. There will be addresses by various of the members of the Executive Committee, including President Stokes, Mrs. Florence Kelley, Mrs. Jessica G. Finch, Miss Jessie Wallace Hughan, Miss Helen Phelps Stokes, Miss Jessie Ashley, Ellis O. Jones, William English Walling, Bouck White and Harry W. Laidler, presiding.

Following this will come the question box session Saturday afternoon, when the delegates will be given an opportunity to ask questions on Socialism. The grand finale will be the dinner Saturday night; subject, "The New Political Alignment." Prof. Thomas C. Hall, of Union Theological Seminary; Dr. John C. Kennedy, the candidate for Governor on the Socialist ticket in Illinois in 1912, and manager of the *Chicago World*; Prof. Ellen Hayes, of Wellesley, and other prominent Socialists and exponents of the progressive movement will speak.

Something Startling

Prof. Irving Fisher, of Yale University, declares that there are 630,000 preventable deaths in the United States every year, says the Appeal. This means seventeen hundred unnecessary deaths every day or more than all the lives lost in the Titanic disaster. What a tremendous sensation was created by the sinking of the Titanic! Yet we pay no attention to the far greater toll of life that is taken day by day throughout the earth through the operation of the capitalist system.

In Crazy Land.

By HENRY M. TICHENOR, the Rip-Saw Poet.

Have you ever been to Crazy Land, down on the Looney Pike? There are the queerest people there—you never saw the like! The ones that do the useful work are poor as poor can be, and those who do no useful work all live in luxury. They raise so much in Crazy Land, of food and clothes and such, that those who work don't have enough because they raise too much.

The children slave in Crazy Land to satisfy the greed of plunder sharks who only live to loaf around and feed. They work young girls in Crazy Land upon starvation pay, and they brand them when, through want, the victims go astray.

They outrage working women and they starve the working men, and if they steal a loaf of bread they land them in the pen. They breed disease in Crazy Land—there's microbes everywhere, in poison food, polluted earth, and foul and fetid air. Half the babies die there filled with germs from filth and swill—and the preachers down in Crazy Land proclaim it is "God's will." For everything in Crazy Land that ought to be abhorred—the crimes that men commit themselves—are laid upon the "Lord"; and the only "God" in Crazy Land is the crazy "God" of Gold—the crazy way they worship this is crazy to behold! They have big wars in Crazy Land, make every crazy law, and run the crazy circumstance with club and fang and claw. And if a sane man cries against their crazy ways and deeds, the crazy priests and preachers yell, "He's bustin' up our creeds!"

Just take a trip to Crazy Land, down on Looney Pike—they are the queerest people there—you never saw the like; they're wrong-side-to in Crazy Land, they're upside down with care—they walk around upon their heads and feet up in the air!

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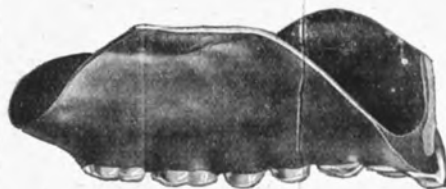
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